

National Highway Traffic Safety Administration

Dear Crash Data Researchers/Users:

Thank you for choosing crash data from the National Highway Traffic Safety Administration (NHTSA) for your research or other use. The information contained in this motor vehicle crash report is collected, maintained and distributed in accordance with Public Law 89-564. In accordance with this Public Law, NHTSA is required not to release any case information until completion of quality control procedures. These procedures include a review of the case material to extract all names, licenses and registration numbers, non-coded interview material, non-research related researcher comments in the margins, non-factual data, and the production number portion of the vehicle identification number (VIN).

If you requested NHTSA to query its database files in order to identify a specific crash, then that query was made using non-personal descriptors you provided for use in our search. This motor vehicle crash may have been identified from a data search and matches the general, non-personal descriptors you provided, but we cannot confirm that this is the specific crash report you requested.

If you have any questions with regard to the above procedures, please contact the Field Operations Branch, Crash Investigation Division, National Center for Statistics and Analysis at 202-366-4820. Again, please be advised that we cannot confirm that this is the case that you have specifically requested nor can we certify the information to be correct.

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U.S. Department of Transportation National Highway Traffic Safety

CASE SUMMARY

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Administration PSU 09

CASE NO. 025-K

TYPE OF ACCIDENT

CAR/CAR - HEAD ON

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

(Provide a summary of the accident sequence as well as any particular event of the accident that is noteworthy. Injury mechanism and vehicle crashworthiness is the focus, not driver culpability. Do not include any personal identifiers.)

Vehicle's #1 and 2 were travelling county roadway, opposing each other. Vehicle #1 crossed the double yellow lines into the path of vehicle #2. Vehicle #1 continued and turned onto its left side.

	Class			re Damage icle Inspection			
Vehicle No.	of Vehicle	Year/Make/Model	Damage Severity Plane Description		Component Failure		
1 % ()	Subcompact	1982/FORD/Escort	Front to	Moderate	None		
, 2	Largest	1966/FORD/Fairlane	Front	Moderate	None		

	C. PERSON PROFILE(S)						
Vehicle No.	Person Role	Seat Position	Restraint		Most (TO BE COMPLE	Severe TED BY	Injury ZONE CENTER)
NO.	noie	Position	Use	Body Region	Injury Type	AIS	Injury Source
1	Driver	Left Front	None	HEAR	LOC	2	Injury Source A-pillar stilring while huhl
2	Driver	Left Front	None	HEAD (FACE)	+X	2	steering while
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		·	,				
					İ		
				: .			

Body Region

Abdomen
Ankle—foot
Arm (upper)

Back-thoracolumbar spine

Chest Elbow Face Forearm

Head — skull Knee

Leg (lower)

Lower limbs(s) (whole or unknown

part)

Neck-cervical spine

Pelvic — hip Shoulder Thigh

Upper limb(s) (whole or unknown

part)

Whole body Wrist-hand Brain

Ears Eye

Heart Kidneys Liver Mouth

Noise Pulmonary—lungs

Spleen

Thyroid, other endocrine gland

Vertebrae

Injury Type

Abrasion Amputation Avulsion Burn Concussion

Contusion

Crush
Detachment, separation

Dislocation Fracture

Fracture and dislocation

Laceration Other

Perforation, puncture

Rupture Sprain Strain

Total severance, transection

Unknown

Abbreviated Injury Scale

(1) Minor injury

(2) Moderate injury

(3) Serious injury

(4) Severe injury

(5) Critical injury

(6) Maximum (untreatable)

(7) Injured, unknown severity

DO NOT SANITIZE THIS FORM

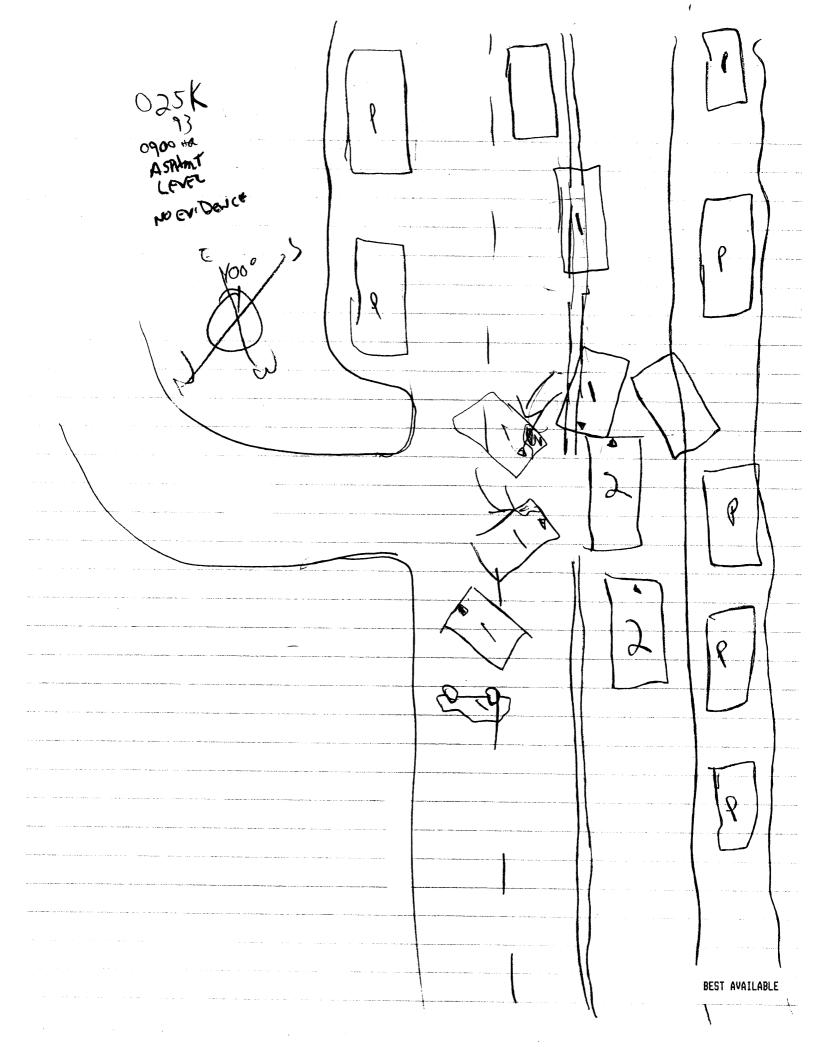
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U.S. Department of Transportation

ACCIDENT COLLISION DIAGRAM

National Highway Traffic Safety Administration NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM "NOT TO SCALE" PSU No. 0 9 Indicate Case Number – Stratum O 2 5 K North 121 T [[]

100°





U.S. Department of Transportation National Highway Traffic Safety Administration

ACCIDENT COLLISION MEASUREMENT TABLE

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Primary Sampling Unit NumberO_	9	Case N	umber-Si	tratum O O S K
	ISION DIAGRAM LEV physical evidence * document refer line relative to j at the scene * scale document induced physical * scaled document objects contact * roadway surfact applicable roads * grade measurer roadways and a initiation * scaled represent pre-impact, imp upon either: a) physical e	EL II (Cont'd) is present: ence point and reference physical features present ration of all accident al evidence intation of all roadside ed to type and condition of ways ments for all applicable at location of rollover itations of the vehicle(s) at eact, and final rest based		CRASH DATA VEH. #1 VEH. #2 VEH. #3 Ingle 295° 100° The ASPHALT DRY The LEVEL Institute of
Reference Point:		Reference line: Distance and Direc		Distance and Direction
		from Reference Po	pint	from Reference Line
	"NO	TO SCALE	"	

	ltem	Distance and Direction from Reference Point	Distance and Direction from Reference Line				
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			· · · · · · · · · · · · · · · · · · ·				
			·				
· · · · · · · · · · · · · · · · · · ·							
* 15 24 141							
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National Highway Traffic Safety

ACCIDENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM

Administration				CRASHWORTHINES	S DATA SYSTE
Primary Sampling Unit Number	09	SP	ECIAL STUDIE	S - INDICATO	ORS
2. Case Number - Stratum IDENTIFICATION	025 K	that has	each special been completed studies and 0 for	; code 1 for th	e checked
Number of General Vehicle Forms Submitted	02	6s	S14 Fatal AOPS	. 2 ·	<u> </u>
4. Date of Accident (Month,Day,Year)/_			S15 Administrati	ve Use	0
5. Time of Accident	0316	-		· · · · · · · · · · · · · · · · · · ·	
Code reported military time of		9\$	517		
NOTE: Midnight = 2400 Unknown = 9999		10s	518		
			NUMBER O	F EVENTS	
			er of Recorded Ev Accident	ents	02
	<u>.</u>		he number of eve accident.	ents which occu	rred
	ACCIDE	NT EVENTS			
For each event that occurred in the a involved vehicle or object on the right	accident, code the	lowest numbe	red vehicle in the	left columns and	d the other
Accident Event Sequence Vehicle Number Number	Class Of Vehicle	Area of	Vehicle Number or Object Contacted	Class Of Vehicle	General Area of Damage
12. <u>0 1</u> 13. <u>0 </u>	14. <u>0 </u>	15. <u>F</u>	16. <u>0</u> <u>2</u>	17. <u>0</u> <u>5</u>	18. <u>F</u>
19. <u>0 2</u> 20. <u>O </u>	21. <u>O</u> [22. <u>L</u>	23. <u>3</u> <u>1</u>	24. <u>O</u> O	25. <u>N</u>
26. <u>0 3</u> 27	28	29	30	31	32
33. 0 4 34	35 :	36	37	38	39

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

40. 0 5 41. ___ 42. __ 43. __ 44. _

CODES FOR CLASS OF VEHICLE

- (00) Not a motor vehicle
- (01) Subcompact/mini (wheelbase < 254 cm)
- (02) Compact (wheelbase ≥ 254 but < 265 cm)
- (03) Intermediate (wheelbase ≥ 265 but < 278 cm)
- (04) Full size (wheelbase ≥ 278 but < 291 cm)
- (05) Largest (wheelbase ≥ 291 cm)
- (09) Unknown passenger car size
- (11) Compact utility vehicle
- (12) Large utility vehicle (≤ 4,500 kgs GVWR)
- (13) Passenger van (≤ 4,500 kgs GVWR)
- (14) Other van ($\leq 4,500 \text{ kgs GVWR}$)
- (15) Pickup truck (≤ 4,500 kgs GVWR)
- (18) Other truck (≤ 4,500 kgs GVWR)
- (19) Unknown light truck type
- (20) School bus
- (21) Other bus
- (22) Truck (> 4,500 kgs GVWR)
- (23) Tractor without trailer
- (24) Tractor-trailer(s)
- (25) Motored cycle
- (28) Other vehicle
- (99) Unknown

CODES FOR GENERAL AREA OF DAMAGE (GAD)

CDS APPLICABLE AND

OTHER VEHICLES

- (0) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back
- (T) Top
- (U) Undercarriage
- (9) Unknown

TDC APPLICABLE **VEHICLES**

- (0) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back of unit with cargo area (rear of trailer or straight truck)
- (D) Back (rear of tractor)
- (C) Rear of cab
- (V) Front of cargo area
- (T) Top
- (U) Undercarriage
- (9) Unknown

CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

(01-30) — Vehicle Number

Noncollision

- (31) Overturn rollover
- (32) Fire or explosion
- (33) Jackknife
- (34) Other intraunit damage (specify):
- (35) Noncollision injury
- (38) Other noncollision (specify):
- (39) Noncollision details unknown

Collision With Fixed Object

- (41) Tree (≤ 10 cm in diameter)
- (42) Tree (> 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment
- (45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post

- (50) Pole or post (≤ 10 cm in diameter)
- (51) Pole or post (> 10 cm but \leq 30 cm in diameter)
- (52) Pole or post (> 30 cm in diameter)
- (53) Pole or post (diameter unknown)
- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail) (specify):

- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify):
- (69) Unknown fixed object

Collision with Nonfixed Object

- (71) Motor vehicle not in-transport
- (72) Pedestrian
- (73) Cyclist or cycle
- (74) Other nonmotorist or conveyance
- (75) Vehicle occupant
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (88) Other nonfixed object (specify):
- (89) Unknown nonfixed object
- (98) Other event (specify):
- (99) Unknown event or object

	onal Accident Sampling System-Crashworthiness Da	P34,09-026K
Natio	onal Accident Sampling System-Crashworthiness Da	nta System: General Vehicle Form V-01 Page 2
1	OCCUPANT RELATED Driver Presence in Vehicle (0) Driver not present (1) Driver present (9) Unknown	(0) No rollover (no overturning) Rollover (primarily about the longitudinal axis) (1) Rollover, 1 quarter turn only
17.	Number of Occupants This Vehicle (00-96) Code actual number of occupants for this vehicle (97) 97 or more (99) Unknown	(2) Rollover, 2 quarter turns (3) Rollover, 3 quarter turns (4) Rollover, 4 or more quarter turns (specify): ———————————————————————————————————
18.	Number of Occupant Forms Submitted O	(9) Rollover (overturn), details unknown
	VEHICLE WEIGHT ITEMS	OVERRIDE/UNDERRIDE (THIS VEHICLE)
	Vehicle Curb Weight O, 9 1 0 Code weight to nearest 10 kilograms. (045) Less than 450 kilograms (610) 6,100 kilograms or more (999) Unknown , 9 1 2 kgs Source: , 9 1 2 kgs Vehicle Cargo Weight , 0, 0 0 Code weight to nearest 10 kilograms. (000) Less than 5 kilograms (450) 4,500 kilograms or more (999) Unknown kgs RECONSTRUCTION DATA	26. Rear Override/Underride (this Vehicle) (0) No override/underride, or not an end-to-end impact Override (see specific CDC) (1) 1st CDC (2) 2nd CDC (3) Other not automated CDC (specify): Underride (see specific CDC) (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify): (7) Medium/heavy truck or bus override
21.	Towed Trailing Unit (0) No towed unit	(9) Unknown
	(1) Yes—towed trailing unit (9) Unknown	HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V
22.	Documentation of Trajectory Data for This Vehicle (0) No (1) Yes	Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown
23.	Post Collision Condition of Tree or Pole (For Highest Delta V) (0) Not collision (for highest delta V) with tree or pole (1) Not damaged (2) Cracked/sheared (3) Tilted <45 degrees (4) Tilted ≥45 degrees (5) Uprooted tree (6) Separated pole from base (7) Pole replaced (8) Other (specify):	27. Heading Angle For This Vehicle 295 28. Heading Angle For Other Vehicle 100
	(9) Unknown	

PSU, D9-035 K
National Accident Sampling System-Crashworthiness Data System: General Vehicle Form V-01

OTHER DATA	61. Rollover Initiation Object Contacted 3
56. Driver's Zip Code	or. Rollover lititation Object Contacted
(00000) Driver not present (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99999) Unknown	62. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover (1) Wheels/tires
57. Driver's Race/Ethnic Origin (0) Driver not present (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (8) Other (specify):	(2) Side plane (3) End plane (4) Undercarriage (5) Other location on vehicle (specify): (8) Non-contact rollover forces (specify): (9) Unknown
(9) Unknown 58. Vehicle Special Use (This Trip) (0) No special use (1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police (6) Ambulance (7) Fire truck or car (8) Other (specify): (9) Unknown	(0) No rollover (1) Roll right - primarily about the longitudinal axis (2) Roll left - primarily about the longitudinal axis (5) End-over-end (i.e., primarily about the lateral axis) (9) Unknown roll direction PRECRASH DATA 64. Pre-Event Movement (Prior to
POLLOVER DATA	Recognition of Critical Event)
ROLLOVER DATA If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank. If GV24 (Rollover) = 0, then GV59-GV63 must equal 0. If GV24 = 9, then GV59-GV63 must equal 9.	 (01) Going straight (02) Slowing or stopping in traffic lane (03) Starting in traffic lane (04) Stopped in traffic lane (05) Passing or overtaking another vehicle
59. Rollover Initiation Type (0) No rollover (1) Trip-over (2) Flip-over (3) Turn-over (4) Climb-over (5) Fall-over (6) Bounce-over (7) Collision with another vehicle (8) Other rollover initiation type specify): (9) Unknown rollover initiation	(06) Disabled or parked in travel lane (07) Leaving a parking position (08) Entering a parking position (09) Turning right (10) Turning left (11) Making a U-turn (12) Backing up (other than for parking position) (13) Negotiating a curve (14) Changing lanes (15) Merging (16) Successful avoidance maneuver to a previous critical event (97) Other (specify): (98) No driver present (99) Unknown
(0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (9) Unknown	(55) GIRIOWII

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover (57) Fence (01-30) — Vehicle Number (58) Wall (59) Building Noncollision (60) Ditch or culvert (31) Turn-over — fall-over (61) Ground (33) Jackknife (62) Fire hydrant (63) Curb **Collision With Fixed Object** (64) Bridge (41) Tree (≤ 10 cm in diameter) (68) Other fixed object (specify): (42) Tree (> 10 cm in diameter) (43) Shrubbery or bush (69) Unknown fixed object (44) Embankment Collision with Nonfixed Object (45) Breakaway pole or post (any diameter) (71) Motor vehicle not in-transport (76) Animal Nonbreakaway Pole or Post (77) Train (78) Trailer, disconnected in transport (50) Pole or post (≤ 10 cm in diameter) (51) Pole or post (> 10 cm but \leq 30 cm in (88) Other nonfixed object (specify): diameter) (52) Pole or post (> 30 cm in diameter) (89) Unknown nonfixed object (53) Pole or post (diameter unknown) (98) Other event (specify): (54) Concrete traffic barrier (99) Unknown event or object (55) Impact attenuator (56) Other traffic barrier (includes guardrail) (specify):



			-	
National	Highway	Traffic	Safety	

FXTERIOR VEHICLE FORM NATIONAL ACCIDENT SAMPLING SYSTEM

Administration		-			V 1 11	<u> </u>	<u> </u>		CRASH	WORTHIN	ESS DATA	SYSTEM
	ry Sampling		_	0 0	_	. Vehicle	e Numbe	er 43	•		_0	
2. Case	Number - St	ratum		<u> 25</u>	R			(130	•			
			,	VEHICLE I	IDENTI	FICATI	ON					
VIN	FAB	<u>_</u>	0 5 2	5 C	T				_	Model Y	ear 8	<u>2</u>
Vehicle Ma	ake (specify):		FORD			Vehicle	Model (s	specify):	ES	CORT		
				L(CATO	R						
	e end of the amaged axle			ct to the vel	nicle lon	gitudina	center	line or b	umper o	corner f	or end ir	mpacts
	mpact No.			of Direct Da	amage			Lo	ocation (of Field	L	
	1	FREST	WT BC 6			980	FICT B	C TO B (C			
	- L		·	·	····							
			CRU	SH PROFI	LE IN	CENTIN	VIETER	S				
 	dentify the pail, etc.) and Measure and Measure C1 impacts. Free space value individuals ide taper, e	l label ad documento C6 from alue is control of the	djustments ent on the v com driver to defined as the tions. This	(e.g., free s rehicle diago o passenger he distance may include	pace). ram the r side in betwee e the fol	location front or n the ba lowing:	of max rear im useline a bumper	imum contacts are and the contact lead, be	rush. nd rear t priginal l umper t	o front	in side	aken at
1	Use as many	lines/co	olumns as n	ecessary to	describ	e each	damage	profile.				
Specific Impact Number	Plane of I		Direct D Width (CDC)	Damage Max Crush	Field L	C ₁	C ₂	C₃	C₄	C _e	C ₆	±D
١	Bunlon		480	Cı	1285	690	44.0	30.0	19.5	9.0	<i>ک.</i> ٥	- 54.5
	75					8-0	3.0	3.0	3.0	3.0	8~0	
	RESULT					61.0	41.0	27.0	16.5	6.0	Ø	
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ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	94.2	inches	x 2.54	=	_239 cm
Overall Length	163.9	inches	x 2.54	=	<u>4 1 6 cm</u>
Maximum Width	<u>65.9</u>	inches	x 2.54	=	<u> 1 6 7 3 cm</u>
Curb Weight	2,011	pounds	x .4536	=	, 9 1 2 kg
Average Track	<u> </u>	inches	x 2.54	=	<u>1 4 3 cm</u>
Front Overhang	<u> 3 2. b </u>	inches	x 2.54	=	<u>8</u> cm
Rear Overhang	-37.7	inches	x 2.54	=	<u>96</u> cm
Undeformed End Width	6 1.8	inches	x 2.54	=	<u> </u>
Engine Size: cyl./displ.		СС	x .001	=	L
	<u>L 4</u>	CID	x .0164	=	L

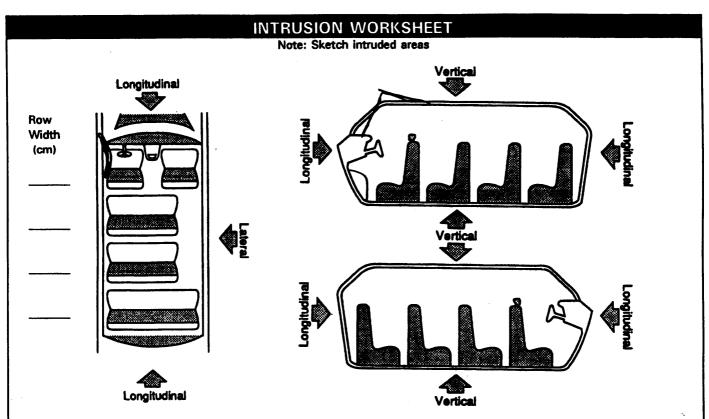
VEHICLE DAMAGE SKETCH **ORIGINAL SPECIFICATIONS** WHEEL STEER ANGLES TIRE-WHEEL DAMAGE (For locked front wheels or a. Rotation physically b. Tire deflated Wheelbase displaced rear axles only) restricted cm RF ± Overall Length cm RF & Maximum Width cm LR ± **Curb Weight** kg Within ± 5 degrees 143.1 cm Average Track (1) Yes (2) No (8) NA (9) Unk. **DRIVE WHEELS** 0.18 Front Overhang cm 96.0 cm ☐ FWD ☐ RWD ☐ 4WD Rear Overhang TYPE OF TRANSMISSION Undeformed End Width 157-0 cm **Approximate** L Engine Size: cyl./displ. · 💢 Manual □ Automatic Cargo Weight ___ kg **MEASUREMENTS IN CENTIMETERS** Original **Bumper height** 54.7 1280 POST-CRASH Bumper corner 75.0 182.0 87.0 Bumper corner Stringline 144.0 Stringline J120 POST-CRASH 243.0 Bumper corner Bumper corner 77-0_Stringline Stringline

NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

CDC WORKSHEET								
CODES FOR OBJECT CONTACTED								
(01-30)	Vehicle Nu	mber			7) Fence 8) Wall			
Noncoll	ision				9) Building			
	Overturn – ro	ollover			0) Ditch or	oulvort		
	Fire or explosi				1) Ground	Cuivert		
	Jackknife	IOH				rant		
		t damasa lanasi	6.A.		2) Fire hyd	rant		
(34)	Other intrauni	t damage (speci	ту):		3) Curb			
(25)	Nanaalliaiaa is				4) Bridge		: 6 . A.	
	Noncollision in	ision (specify):		(0	6) Other 11)	ked object (s	specity):	
(30)	Other honcom	ision (specify):		I.G.	O) Hakaasa	n fixed obje		
(39)	Noncollision -	- details unknov	WD.	_ (6	e) Ulikilow	n nxeu obje	Ci	
(55)	Noncomsion -	- details diskilov	VII	Collie	sion with No	onfixed Obje	oct	
Collision	n With Fixed O	hiect				ehicle not in		
	Tree (≤ 10 ci				2) Pedestri		danaport	
	Tree (> 10 ci				3) Cyclist (
	Shrubbery or			17	4) Other no	onmotorist o	r conveyan	`
	Embankment			17	*, O thor in		, oonvoyand	
• • • • •				(7	5) Vehicle	occupant		
(45)	Breakaway po	le or post (any	diameter)		6) Animal			
, ,	т. т				7) Train			
Nonbrea	akaway Pole o	r Post				disconnecte	d in transpor	rt
		≤ 10 cm in diar	neter)			onfixed obje		
(51)	Pole or post (> 10 cm but ≤	30 cm in	'-				
	diameter)			(8	9) Unknow	n nonfixed	object	
		> 30 cm in diar		_			_	
(53)	Pole or post (diameter unknov	vn)	(9	8) Other ev	vent (specify	/):	
	_			لمل				
	Concrete traff			// (9	9) Unknow	n event or o	object	
	Impact attenu			7				
(56)		parrier (includes	~					
	(specify):			-				······
		DEFORMA [*]	TION CLASS	IFICATION E	BY EVENT N	IUMBER		
					(4)	(5)		
Accident		(1) (2)			Specific	Specific	(6)	
Event		Direction	Incremental		Longitudinal	Vertical or	Type of	(7)
Sequence	•	of Force	Value of	Deformation	or Lateral	Lateral	Damage	Deformation
Number	Contacted	(degrees)	Shift	Location	Location	Location	Distribution	Extent
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lational Highway Traffic Safety INTERIOR VE	HICLE FORM NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
1. Primary Sampling Unit Number	GLAZING
	Glazing Damage from Impact Forces
2. Case Number - Stratum O 2 5 K	15. WS 2 16. LF 6 17. RF 0 18. LR 6 19. RR 0
3. Vehicle Number	20. BL O 21. Roof 822. Other O
INTEGRITY	· · · · · · · · · · · · · · · · · · ·
4. Passenger Compartment Integrity 000) No integrity loss	 (0) No glazing damage from impact forces (2) Glazing in place and cracked from impact forces (3) Glazing in place and holed from impact forces (4) Glazing out-of-place (cracked or not) and not holed from impact forces
Yes, Integrity Was Lost Through (O1) Windshield	(5) Glazing out-of-place and holed from impact forces(6) Glazing disintegrated from impact forces
(O2) Door (side) (O3) Door/hatch (back door)	(7) Glazing removed prior to accident (8) No glazing
(O4) Roof	(9) Unknown if damaged
(05) Roof glass 孝(06) Side window	
(07) Rear window (backlight)	Glazing Damage from Occupant Contact
(08) Roof and roof glass	23. WS O 24. LF O 25. RF O 26. LR O 27. RR O
(09) Windshield and door (side) (10) Windshield and roof	
(11) Side and rear window (side window and backlight)	28. BL_O 29. Roof O 30. Other O
(12) Windshield and side window (13) Door and side window	(0) No occupant contact to glazing or no glazing
(98) Other combination of above (specify):	(1) Glazing contacted by occupant but no glazing damage
(00)	(2) Glazing in place and cracked by occupant contact (3) Glazing in place and holed by occupant contact
(99) Unknown	(4) Glazing out-of-place (cracked or not) by occupant
	contact and not holed by occupant contact (5) Glazing out-of-place by occupant contact and holed by
Door, Tailgate or Hatch Opening	occupant contact
	(6) Glazing disintegrated by occupant contact (9) Unknown if contacted by occupant
5. LF 3 6. RF 1 7. LR 0 8. RR 0 9. TG/H 1	
(O) No door/gate/hatch	If No Glazing Damage <i>And</i> No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As Ø
(1) Door/gate/hatch remained closed and operational	
(2) Door/gate/hatch came open during collision (3) Door/gate/hatch jammed shut	Type of Window/Windshield Glazing
(8) Other (specify):	
(9) Unknown	31. WS <u>/</u> 32. LF <u>2</u> 33. RF <u>0</u> 34. LR <u>0</u> 35. RR <u>0</u>
(c) Chalcul	36. BL 37. Roof 38. Other
Barrers (Fell or Associated with Barre Tellands and Head	(0) No glazing contact and no damage, or no glazing
Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø	(1) AS-1 — Laminated (2) AS-2 — Tempered
opening in comment. In 1400 1400 y- 2, Then dode y	(3) AS-3 — Tempered-tinted
10. LF <u>0</u> 11. RF <u>0</u> 12. LR <u>0</u> 13. RR <u>0</u> 14. TG/H <u>0</u>	(4) AS-14 — Glass/Plastic (8) Other (specify):
(0) No door/gate/hatch or door not opened	(9) Unknown
Door, Tailgate or Hatch Came Open During Collision	
(1) Door operational (no damage) (2) Latch/striker failure due to damage	Window Precrash Glazing Status
(3) Hinge failure due to damage	39. WS / 40. LF 2 41. RF 0 42. LR 0 43. RR 0
(4) Door structure failure due to demage	
(5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage	44. BLO 45. Roof O 46. Other O
(6) Latch/striker and hinge failure due to damage(8) Other failure (specify):	(0) No glazing contact and no damage, or no glazing
	(1) Fixed (2) Closed
(9) Unknown	(3) Partially opened
	(4) Fully opened (9) Unknown



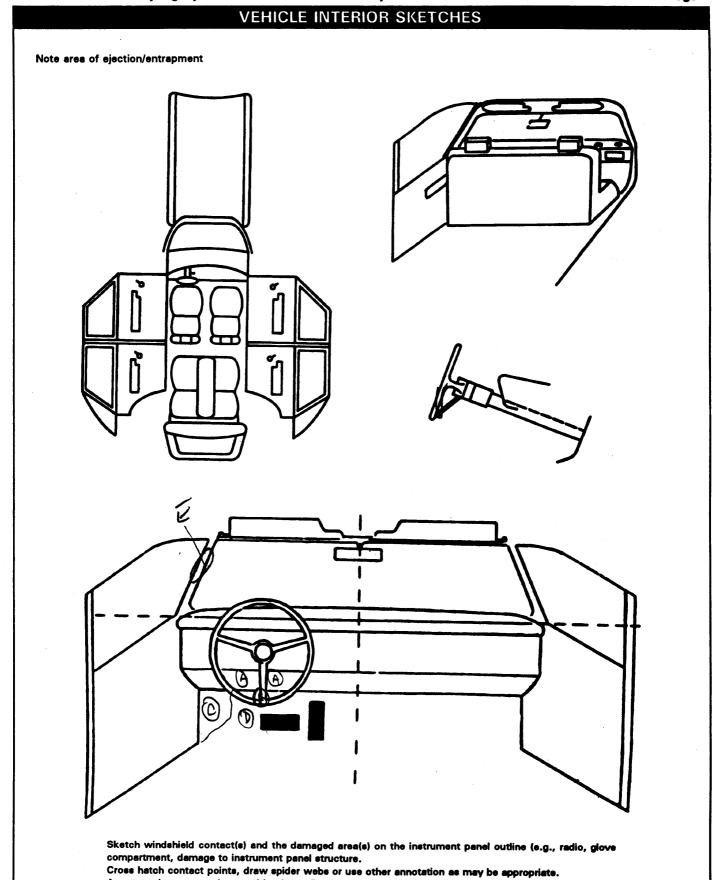
LOCATION OF INTRUSION	INTRUDED COMPONENT	COMPARISON VALUE	Moas	urements Are in Cent INTRUDED VALUE	imeters	INTRUSION	DOMINANT CRUSH DIRECTION
11	FLOOR BOMMD	(30.0	_	110.0	=	20.00	Lona
11	KICK PONEL	60.0		43. o	=	(7.0 W	LAT
(1	A PILLAR	0.601	_	76.0	=	26.60	LONG
11	1 INST. PANEL	95.0	_	71.0	=	2403	(0.0€
ار	(INST. PAPEL	95.0	_	71-0	=	24.09	Lowa
11	FLODE SEAT	101.0	_	75.0	.=	26.0 B	Vert
	SEAT INTRIDED VERT UNK	DEGREE	_		=	· · · · · · · · · · · · · · · · · · ·	
			_		=		
			_		=		
			_		=		
			_		=		
					=		
			_		=		
			_		=		
					=		

National Accident Sampling System-Crashworthiness Data System: Interior Vehicle Form

OCCUPANT AREA INTRUSION Note: If no intrusions, leave variables IV47-IV86 blank. INTRUDING COMPONENT **Dominant** Interior Components Location of Intrudina Magnitude Crush. (01) Steering assembly Direction Intrueion Component of Intrusion (02) Instrument panel left (03) Instrument panel center 6+4 (04) Instrument panel right Jet 47. 1 1 48. 0 6 49. 5 50. 2 (05) Toe pan (06) A (A1/A2)-pillar (07) B-pillar (08) C-pillar 2nd 51. 1 52. 2 4 53. 3 54. 1 (09) D-pillar (10) Door panel (side) (12) Roof (or convertible top) (13) Roof side rail <u>L 56. 0 2 57. 3 58. 2</u> (14) Windshield (15) Windshield header (16) Window frame 2 60. 0 3 61. 3 62. 2 →(17) Floor pan (includes sill) (18) Backlight header (19) Front seat back (20) Second seat back <u>1</u> 64. <u>1</u> 7 65. <u>3</u> 66. <u>2</u> (21) Third seat back (22) Fourth seat back (23) Fifth seat back (24) Seat cushion 151 1 68. 2 7 69. 3 70. 3 (25) Back door/panel (e.g., tailgate) (26) Other interior component (specify): (27) Side panel - forward of the A (A2)-pillar (28) Side panel - rear of the A (A2)-pillar 7th 71.___ 72.___ 73.__ 74.___ **Exterior Components** (30) Hood (31) Outside surface of this vehicle (specify): 75.___ 76.__ 77.__ 78.__ 8th (32) Other exterior object in the environment (specify): 79. 80.___ 81.__ 82.__ (33) Unknown exterior object 9th (97) Catastrophic (98) Intrusion of unlisted component(s) (specify): FLOOR UNDER SEAT 83.___ 84.__ 85.__ 86.__ (99) Unknown **LOCATION OF INTRUSION** MAGNITUDE OF INTRUSION (1) ≥ 3 centimeters but < 8 centimeters Front Seat Fourth Seat (2) ≥ 8 centimeters but < 15 centimeters (11) Left (41) Left (3) ≥ 15 centimeters but < 30 centimeters 6 - 12 (12) Middle (42) Middle $(4) \ge 30$ centimeters but < 46 centimeters (13) Right (43) Right (5) ≥ 46 centimeters but < 61 centimeters $(6) \geq 61$ centimeters **Second Seat** (97) Catastrophic (7) Catastrophic (21) Left (98) Other enclosed (9) Unknown (22) Middle area (specify) (23) Right (99) Unknown **DOMINANT CRUSH DIRECTION** Third Seat (1) Vertical (31) Left (2) Longitudinal (32) Middle (3) Lateral (33) Right (7) Catastrophic (9) Unknown

COMPARISON VALUE	(All	Maesuremente Are in Centimet							
COMPARISON VALUE			(All Measurements Are in Contimeters)						
	_	DAMAGE VALUE	=	DEFORMATION					
			=						
	_		=						
	-								
			=						
	÷								

87. Steering Column Type (1) Fixed column (2) Tilt column (3) Telescoping column (4) Tilt and telescoping column (8) Other column type (specify): (9) Unknown	93. Location of Steering Rim/Spoke Deformation (00) No steering rim deformation Quarter Sections (01) Section A (02) Section B (03) Section C (04) Section D Half Sections (05) Upper half of rim/spoke (06) Lower half of rim/spoke
88. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	(07) Left half of rim/spoke (08) Right half of rim/spoke (09) Complete steering wheel collapse (10) Undetermined location (99) Unknown
	INSTRUMENT PANEL
89. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	94. Odometer Reading
90. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	(001) Less than 1,500 kilometers (500) 499,500 kilometers or more (999) Unknown 84,637 miles x 1.6093 = 136,206 kilometers Source: 00 and TEX
91. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	95. Instrument Panel Damage from Occupant Contact? (0) No (1) Yes (9) Unknown
92. Steering Rim/Spoke Deformation Code actual measured deformation to the nearest centimeter (00) No steering rim deformation (01-14) Actual measured value in centimeters	96. Knee Bolsters Deformed from Occupant Contact? (0) No (1) Yes (8) Not present (9) Unknown
(15) 15 centimeters or more (98) Observed deformation cannot be measured (99) Unknown	97. Did Glove Compartment Door Open During Collision(s)? (0) No (1) Yes (8) Not present (9) Unknown



Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

		POI	NTS (OF OC	CUPANT CONTAC	CT		
	Interior Component	Occupant No. If	R	Body egion If	C			Confidenc Level of Contact
Contact	Contacted	Known	_	nown	Supporting Physical Evidence		vidence	Point
A	70	-		NEES	KNEE PRINT		· · · · · · · · · · · · · · · · · · ·	
B		<u> </u>		Hest	perdino			
С	77			ou	INTENSION			1
D	56			et	11			1
E	22		He	AP	PLASTIC COVER	CRACI	UED	
F		·					·	
G								
Н								
ı								
J								
К								
L								
M			_					
N			+					
	invisor eering wheel rim eering wheel hub/spok	:e		Left side v	window glass or frame window glass including ore of the following:		Other interior obje	
	•	•	(26)		•	(49)	Other interior obje	oct (specify):
(06) St	eering wheel (combina codes 04 and 05)				ndow sill, A (A1/A2)-pillar, r roof side rail.		-	
(07) St	eering column, transm		(27)	Other left	side object (specify):	ROOF	Front hooder	
	lector lever, other atta Id on equipment (é.g.,		(28)		window sill	(50) (51)	Front header Rear header	
	ck, air conditioner) ft instrument panel an	d below	RIGHT	SIDE		(52) (53)	Roof left side rail Roof right side rai	i .
(10) Ce	enter instrument panel	and below		Right side	interior surface,		Roof or convertible	
	ght instrument panel a ove compartment doo		(31)	_	hardware or armrests hardware or armrest	FLOOR		
• •	nee bolster Indshield including one		(32) (33)		\1/A2)-pillar		Floor (including to	•
of	the following: front he (A1/A2)-piller, instrum	eader,	(34)		nt pillar (specify):	(67)	transmission level	
sic	irror, or steering assen de only) indshield including one	•	(35) (36)	Right side	window glass or frame window glass including ore of the following:		Parking brake han Foot controls included brake	
of	the following: front h	eader,		frame, wi	ndow sill, A (A1/A2)-pillar, r roof side rail.	REAR		
mi	(A1/A2)-pillar, instrum irror (passenger side o	nly)	(37)	•	r roor side rail. nt side object (specify):	(60)	• .	
	river side air bag comp over	artment	(38)	Right side	window sill	(61) (62)	Backlight storage Other rear object	• •
(17) Pa	ssenger side air bag					,,,,,,		
	empartment cover indshield reinforced by	exterior	INTERIO	OR Seat, bac	k support	<u></u>		
ob	oject (specify): ther front object (spec		(41)	Belt restre	sint webbing/buckle sint B-pillar		CONFIDENCE LE	
			(43)	attachme Other res	nt point traint system component		CONTACT P	DINT
LEFT SIDE	oft side interior surface	1.		(specify):	•		(1) Certain	_
ех	cluding hardware or a	rmrests		Air bag (use codes "16" and "17"		(2) Prob a bl (3) Possible	
(21) Le	ft side hardware or an	mrest		for injurie	e eustained from air bag		(9) Unknov	vn ·

compartment covers)

(22) Left A (A1/A2)-pillar

		AUTOMATIC RESTRAINTS	
NOTE		pplicable front seat position. The attrib hould be assessed during the vehicle in	
	1	AIR BAGS	
		Left	Right
F	Availability/Function		
Ŕ	Deployment		
S T	Failure		
(0) (1) <i>Non</i> - (2) (3)	System Availability/Function Not equipped/not available Air bag -functional Air bag disconnected (specify): Air bag not reinstalled Unknown	Air Bag System Deployment (Q) Not equipped/not available (1) Air bag deployed during accident (a) a result of impact) (2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined (4) Nondeployed (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion electrical) (9) Unknown	Old Air Beg System FeE? (O) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown
		AUTOMATIC BELTS	
		Left	Right
	Availability/Function		
F	Use		
Ŕ	Туре		
S	Proper Use		
•	Failure Modes		
(0) (1) (2) (3) (4) (9) Autom. (0)	atic (Passive) Belt System Delity/Function Not equipped/not available 2 point automatic belts 3 point automatic belts Automatic belts - type unknown -functional Automatic belts destroyed or rendered inoperative Unknown atic (Passive) Belt System Use Not equipped/not available/destroyed or rendered inoperative Automatic belt in use	Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lep portion of automatic belt worn on abdomen	Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(a) (2) Torn webbing (stretched webbing no included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify)
(2) (3) (9) Automa (0) (1) (2)	Automatic belt not in use (manually disconnected, motorized track inoperative) Automatic belt use unknown Unknown atic (Passive) Belt System Type Not equipped/not available Non-motorized system Motorized system Unknown	(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown	

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Ocupant Assessment Form.

If a Child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.

		Left	Center	Right
F	Availability	4	0	y
R	Use	00	0 6	00
S	Failure Modes	0	O.	0
S	Availability	3	3	_3
OZOJE	Use	0.6	00	06
) D	Failure Modes	O	0	0
T	Availability			
ı	Use			
R D	Failure Modes			
Q	Availability			·
H	Use			
E R	Failure Modes			

Manual (Active) Belt System Availability

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):
- (9) Unknown

Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperable (specify):
- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used type unknown

- (08) Other belt used (specify):
- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat type unknown
- (18) Other belt used with child safety seat (specify):
- (99) Unknown if belt used

Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other manual belt failure (specify):
- (9) Unknown

Oc	cupant Number	7					
1.	Type of Child Safety Seat		T				
2.	Child Safety Seat Orientation			$\overline{}$			
3.	Child Safety Seat Harness Usage						
4.	Child Safety Seat Shield Uasge						
5.	Child Safety Seat Tether Usage						
6.	Child Safety Seat Make/Model	Spec	ify B	elow for E	ach Child Saf	ety Seat	
1.	Type of Child Safety Seat		3.	Child Saf	ety Seat Harr	ness Usage	
	(0) No child safety seat (1) Infant seat		4.	Child Saf	ety Seat Shie	old Usage	
	(2) Toddler seat		5	Child Saf	ety Seat Teth	or Heada	
	(3) Convertible seat		Э.			her Usage Are Used for V	ariables 3-5.
	(4) Booster seat(7) Other type child safety seat (specify	/):		•	child safety s		
	(8) Unknown child safety seat type (9) Unknown if child safety seat used			(01) Aft		rness/Shield/To ness/shield/tet	
2.	Child Safety Seat Orientation			(02) Aft	er market har	ness/shield/tet	
	(00) No child safety seat		(03) Child safety seat used, but no afte harness/shield/tether added				
	Designed for Rear Facing for					ess/shield/teth	er
	This Age/Weight (01) Rear facing			add	led or used		
	(02) Forward facing			Designed	With Harnes	s/Shield/Tethe	r
	(08) Other orientation (specify):					ether not used	-
	(09) Unknown orientation	-			ness/shield/te known if harn	ether used ess/shield/teth	er used
	Designed for Forward Facing for This			Unknowi	n If Designed	With Harness/	Shield/Tether
	Age/Weight			(21) Har	ness/shield/te	ether not used	
	(11) Rear facing (12) Forward facing				ness/shield/te		
	(18) Other orientation (specify):					ess/shield/teth	
	(19) Unknown orientation	-				l safety seat u	sed
	Unknown Design or Orientation For This	3	6.		iety Seat Mak make/model a	ke/Model and occupant i	number)
	Age/Weight, or Unknown Age/Weight						-
	(21) Rear facing (22) Forward facing						
	(28) Other orientation (specify):						
	(29) Unknown orientation						
	(10) Cinaloviii Cilonation						

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F	Head Restraint Type/Damage	3	0	3
I R	Seat Type	62	6.9	02
S	Seat Performance	Ь	0	1
T	Seat Orientation	Ł .	0	1
S	Head Restraint Type/Damage	0	8	0
E	Seat Type	05	05	05
0 N	Seat Performance	1		,
Ď	Seat Orientation	1	<i>'</i>	1
т	Head Restraint Type/Damage			
Ĥ	Seat Type			
Ŕ	Seat Performance			
D	Seat Orientation			
0	Head Restraint Type/Damage			
H	Seat Type			
E	Seat Performance			
R	Seat Orientation			

Head Restraint Type/Damage by Occupant at This **Occupant Position**

- No head restraints
- (1) Integral - no damage
- Integral damaged during accident (2)
- (3)
- Adjustable no damage Adjustable damaged during accident (4)
- (5)
- Add-on no damage Add-on damaged during accident (6)
- (8) Other Specify):
- (9) Unknown

Seat Type (this Occupant Position)

- (00) Occupant not seated or no seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., column supported)
- (09) Other seat type (specify):
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

Seat Performance (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed specify:
- (4) Seat tracks/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown

Seat Orientation (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) Forward facing seat
- (2) Rear facing seat
- (3) Side facing seat (inward)
- (4) Side facing seat (outward)
- (8) Other (specify):
- (9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT **CONTACT PATTERN)**

ribe indications of ejection and									
PAR INDIC	ates	PARTIAL	. ६३६-८	TION / INS	Pection)	DID NOT	REVEAL	PARTIAL	<u>(</u> न्द
									<u>-</u>
Occupant Number									
Ejection			30/	je					
(Note on Vehicle Interior Sketch) Ejection Area		/	/اه						
Ejection Medium									
Medium Status									
ion Complete ejection Partial ejection Ejection, Unknown degree Unknown	(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown Ejection Medium (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):			(8 (9) (9)	(5) Integral structure (8) Other medium (specify): (9) Unknown Medium Status (Immediately Prior to Impact) (1) Open (2) Closed (3) Integral structure (9) Unknown				
ion Area Windshield Left front Right front Left rear Right rear Rear				(1)					
RAPMENT No [4 Ye	s []								_



OCCUPANT ASSESSMENT FORM

Form Approved
O.M.C. No. 2127-0021

National Highway Traffic Safety Administration O.M.R. No. 2127-0021
NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1 Primary Sampling Unit Number	OCCUPANT'S SEATING
7. Frimary Sampling One Number	10. Occupant's Seat Position
2. Case Number - Stratum O J S K	Front Seat
3. Vehicle NumberO1	(11) Left side (12) Middle
4. Occupant Number O I	(13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident.	Second Seat (21) Left side
(00) Less than one year old (specify by month):	(22) Middle
(97) 97 years and older	(23) Right side (24) Other (specify):
(99) Unknown	(25) On or in the lap of another occupant
	Third Seat
1	(31) Left side
6. Occupant's Sex (1) Male	(32) Middle (33) Right side
(2) Female	(34) Other (specify):
(9) Unknown	(35) On or in the lap of another occupant
	Fourth Seat
7 Occurrent's Uniche 9 9 9	(41) Left side (42) Middle
7. Occupant's Height	(43) Right side
centimeter.	(44) Other (specify):(45) On or in the lap of another occupant
(999) Unknown	(45) On or in the lap of another occupant
inches X 2.54 = centimeters	(97) In or on unenclosed area (98) Other seat (specify):
065	(99) Unknown
8. Occupant's Weight	•
Code actual weight to the nearest	l <u>.</u>
kilogram. (999)Unknown	11. Occupant's Posture (0) Normal posture
	Abnormal posture
pounds X .4536 = 065 kilograms	(1) Kneeling or standing on seat
EMS	(2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat
9. Occupant's Role	(4) Sitting sideways or turned to talk with another occupant or to look out a rear window
(1) Driver	(5) Sitting on a console (6) Lying back in a reclined seat position
(2) Passenger (9) Unknown	(7) Bracing with feet or hands on a surface in front
(b) Challowii	of seat (8) Other abnormal posture (specify):
	(9) Unknown
	(5, 5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,

	EJEC	TION/E	NTRAPMENT
12.	Ejection (0) No ejection (1) Compléte ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	0	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13.	Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	0	16. Entrapment (NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.) (0) Not entrapped (1) Entrapped (9) Unknown
14.	Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	0	

RESTRAINT SYS	TEM EVALUATION
17. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt	21. Air Bag System Availability/Function (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify):
(5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed)	(3) Air bag not reinstalled (9) Unknown
(8) Other belt (specify): (9) Unknown	22. Air Bag System Deployment (0) Not equipped/not available (1) Air bag deployed during accident (as a result of impact)
18. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown	 (2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined (4) Nondeployed (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
(08) Other belt used (specify): (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used	(9) Unknown 23. Are There Indications of Air Bag System Failure? (0) Not equipped/not available (1) No (2) Yes (specify):
19. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	(9) Unknown Note: See Variables 44 through 48 (Page 5) for Information on Automatic Belts
Belt Used Improperty (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify):	24. Police Reported Restraint Use (0) None used (1) Police did not indicate restraint use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Other or automatic restraint (specify):
(9) Unknown	(8) Restrained, type unknown (9) Police indicated "unknown"
20. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify):	
(9) Unknown	

HEAD RESTRAINT AN	D SEAT EVALUATION
25. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 26. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Other seat type (specify): (10) Box mounted seat (i.e., van type) (99) Unknown	27. Seat Performance (this Occupant Position) (0) Occupant not seated or no seat (1) No seat performance failure(s) (2) Seat adjusters failed (3) Seat back folding locks or "seat back" failed (4) Seat track/anchors failed (5) Deformed by impact of occupant (6) Deformed by passenger compartment intrusion (specify):

C	HILD SAF	ETY SEAT
(000) No child safety seat Applicable codes are found in your NASS	O O	31. Child Safety Seat Harness UsageOO
Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):		32. Child Safety Seat Shield Usage OO
(998) Unknown make/model (999) Unknown if child safety seat used	-	33. Child Safety Seat Tether Usage Note: Options below applicable to Variables OA31-OA33. (00) No child safety seat
29. Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used		Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used
30. Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/We (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used		Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

	INJURY CONSEQUENCES	38. Working Days Lost
34.	Injury Severity (Police Rating)	Code the number of days (up through 60) that the occupant
	(0) O - No injury	lost from work due to the accident
	(1) C - Possible injury	(00) No working days lost
İ	(2) B - Nonincapacitating injury	(61) 61 days or more (62) Fatally injured
	(3) A - Incapacitating injury	(97) Not working prior to accident
	(4) K - Killed (5) U - Injury, severity unknown	(99) Unknown
	(6) Died prior to accident	
	(9) Unknown	STOP - GO TO VARIABLE 44 ON PAGE 7
35	Treatment - Mortality 3	VARIABLES 39 THROUGH 43 ARE
00.	(0) No treatment	COMPLETED BY THE ZONE CENTER
	(1) Fatal	
	(2) Fatal - ruled disease (specify):	39. Time to Death
		Code number of hours from time of
	Nonfatal	accident to time of death up through 24
	(3) Hospitalization	hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day =
	(4) Transported and released	31, 2 days = 32, n days = 30 +n up
	(5) Treatment at scene - nontransported (6) Treatment later	through 30 days = 60)
1	(8) Treatment - other (specify):	(00) Not fatal (96) Fatal - ruled disease
		(99) Unknown
	(9) Unknown	
26	Time Of Medical Facility (for Initial Treatment)	40. 1st Medically Reported Cause of Death
30.	Type Of Medical Facility (for Initial Treatment)(0) Not treated at a medical facility	41. 2nd Madically Denomed Course of Death
	(1) Trauma center	41. 2nd Medically Reported Cause of Death
	(2) Hospital	42. 3rd Medically Reported Cause of Death
	(3) Medical clinic (4) Physician's office	Code the Occupant Injury from line
	(5) Treatment later at medical facility	number(s) for the medically reported
	(8) Other (specify):	injury(s) which reportedly contributed to this occupant's death
		(00) Not fatal or no additional causes
	(9) Unknown	(97) Other result (includes fatal ruled
İ		disease) (specify):
37.	Hospital Stay	(99) Unknown
	(00) Not Hospitalized	(55, 5
	Code the number of days (up through 60) that the occupant stayed in hospital.	
	(61) 61 days or more	43. Number of Recorded Injuries for This Occupant
	(99) Unknown	Code the actual number of
		injuries recorded for this occupant.
		(00) No recorded injuries
		(97) Injured, details unknown (99) Unknown if injured
		1007 Olikilowii ii iijuleu
 		l

AUTOMATIC BELT SYSTEM 44. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown	48. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):
45. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown	49. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify): (9) Unknown
46. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown	STOP - VARIABLES 50 THROUGH 52 ARE COMPLETED BY THE ZONE CENTER TRAUMA DATA
47. Proper Use of Automatic (Passive Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown	50. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured 51. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given 52. Arterial Blood Gases (ABG) - HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of theHCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
ARE ALL APPLICABLE MEDICAL RECO WITH INITIAL SUBMISSION?	
UPDATE CANDIDATE?	NO[] YES[V

Administration

BEST AVAILABLE

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

OCCUPANT INJURY FORM

1.	Primary	Sampling	Unit	Number

025K

3. Vehicle Number

01

2. Case Number - Stratum

919

4. Occupant Number

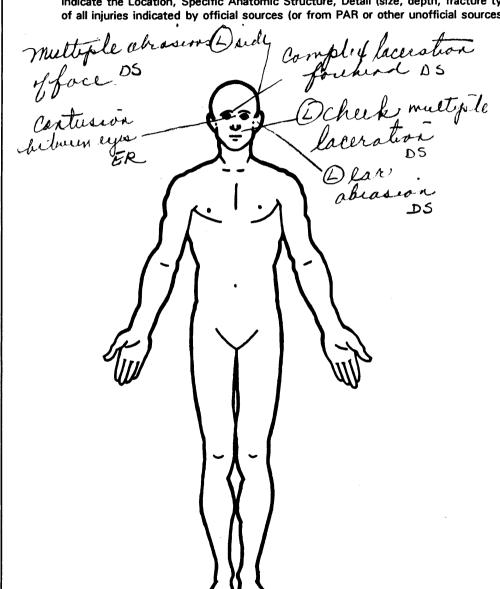
INJURY DATA

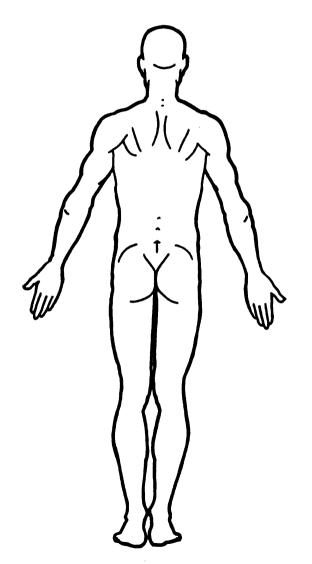
Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

		0.l.CA.l.S						-	Injury		Occupant
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
40C		6	7. 6 8	.04	9. 10	10.2	11.0	-12. <u>2</u> 2	13. 2	14. /	15. Ob
	head d										
2nd	16. 2	17. A	18. 9 19	06	20. 00	21.	22. 7	23. <u>22</u>	24. 2	25.	26.06
100000000000000000000000000000000000000	plac										
3rd	27	28.2	29 30	06	31. <u>00</u>	32. <u>/</u>	33.2	34. <u>2</u> 2	35. <u>2</u> :	36	37. <u>06</u>
	fore he										
4th	383	39. <u>2</u>	40. <u>9</u> 41	. <u>04</u>	42. <u>0</u> 2	43	44. <u> </u>	45. <u>2</u> 2	46. 2	_{17.} _	48. <u>06</u>
	Cear										.,
5th	49. 2	_{50.} <u>2</u>	51 52	.02	53. <u>0</u> <u>2</u>	54. <u>/</u>	_{55.} <u>2</u>	56. <u>22</u>	57.2	58. 🖊	_{59.} <u>06</u>
6th	60	61	62 63	·	64	65	66	67	68	59	70
7th	71	72	73 74	·	75	76	77	78	79	30	81
8th	82	83	84 85	•	86	87	88	89	90	91	92
9th	03	0.4	ne os		0.7						
301	93	94	30 9C		97	a8	99	100	101 1)2 1	03
10th	104. 1	05. 1	06. 107		108.	109.	110.	111	112. 1	13. 1	14.
			_							· '	

				occu	PANT I	NJURY	DATA				
	Source of Injury Data	Body Region	Type of Anatomic Structure	O.I.CA. Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th											
12th	_								_		
13th											
14th						•					
15th											
16th							_		_		
17th									_		
18th			—				_		_		
19th 20th									_		
21st											
22nd									_		
23rd						_	_		_		
24th		*****					_		_		
25th			-								

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





SOURCE OF INJURY DATA OFFICIAL

- (1) Autopsy records with or without hospital/ medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- Interviewee
- (8) Other source (specify):
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination
- of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (80) Add on equipment (e.g., CB, tape deck, air conditioner)
- Left instrument panel and below
- Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify):_
- (19) Other front object (specify):

LEFT SIDE

- (20) Left side interior surface. excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify):
- Right side window glass or frame (35)
- Right side window glass including (36)one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify):_
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Interior loose objects
- (48) Child safety seat (specify):
- (49) Other interior object (specify):

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

(60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE

- (85) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- Other exterior surface or tires (specify):
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify):
- (73) Hood
- (74)Hood ornament
- (75)Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78)Other side protrusions (specify)
- (79)Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- Other exterior of other motor vehicle (specify):
- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE **ENVIRONMENT**

- (84) Ground
- (85) Other vehicle or object (specify)
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- Other noncontact injury source (specify):
- (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- Certain (1)
- Probable (2)
- Possible (3)
- Unknown

DIRECT/INDIRECT INJURY

- Direct contact injury (1)
- Indirect contact injury (2)
- Noncontact injury (3) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- (2) Face (3) Neck
- (4) (5) Thorax Abdomen
- **Upper Extremity** (7)
- **Lower Extremity** Unspecified

Type of Anatomic Structure

- Whole Area
- Vessels
- (3) Nerves
- Organs (includes muscles/ ligaments) Skeletal (includes joints)
- (6) (9) Head - LOC Skin

Specific Anatomic Structure

- Whole Area (02) Skin Abrasion (04) Skin Contusion
- (06) Skin Laceration (08) Skin Avulsion
- Amputation
- Burn (20) (30) Crush
- (40) (50)
- Degloving Injury NFS Trauma, other than mechanical

- Head LOC (02) Length of LOC (04, 06, 08) Level of Consciousness (10) Concussion
- Spine (02) Cervical (04) Thoracic (06) Lumbar

Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, OO is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor injury
- Moderate injury
- Serious injury
- (3) (4) (5) Severe injury Critical injury
- Maximum (untreatable) (6) (7) Injured, unknown severity

Aspect

- (1) Right
- Bilateral
- (3) (4) (5) (6) (7) Central Anterior
- Posterior Superior
- (8) Inferior (9) Unknown
- Whole region

OFFICIAL INJURY DATA — SKELETAL INJURIES

Yes

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

Blood Alcohol Level (mg/dl)

BAL = 29

Glasgow Coma Scale Score

GCSS = 15

Units of Blood Given

Units =

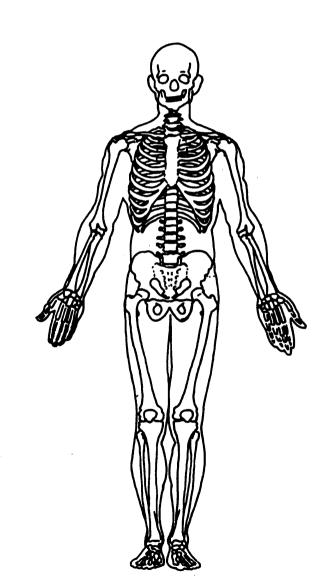
Arterial Blood Gases

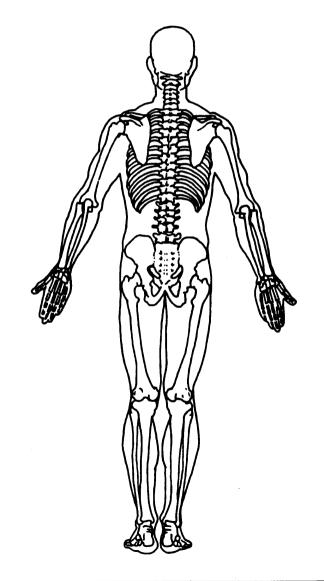
pH = __.__

PO₂= ____

PCO₂

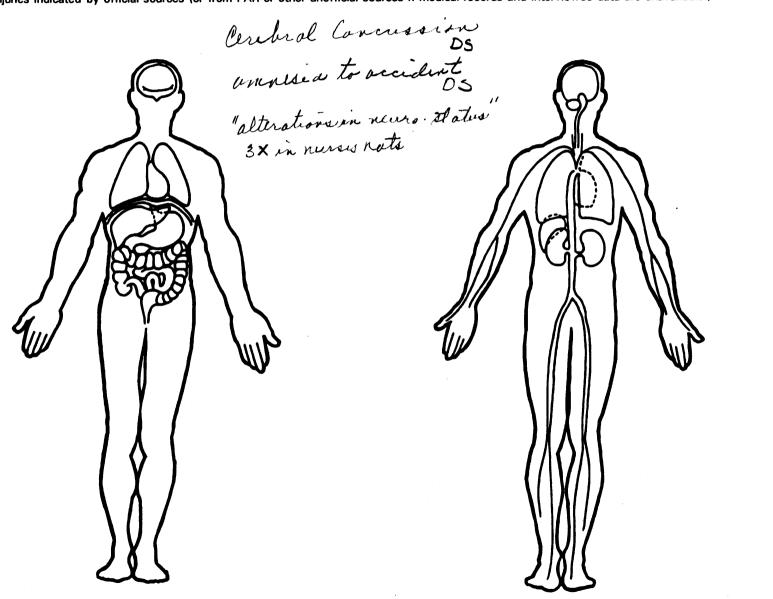
not





National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



	OCCUPANT RELATED	24. Rollover
17.	Driver Presence in Vehicle (0) Driver not present (1) Driver present (9) Unknown Number of Occupants This Vehicle (00-96) Code actual number of occupants for this vehicle (97) 97 or more (99) Unknown Number of Occupant Forms Submitted	(0) No rollover (no overturning) Rollover (primarily about the longitudinal axis) (1) Rollover, 1 quarter turn only (2) Rollover, 2 quarter turns (3) Rollover, 3 quarter turns (4) Rollover, 4 or more quarter turns (specify): (5) Rolloverend-over-end (i.e., primarily about the lateral axis) (9) Rollover (overturn), details unknown
	VEHICLE WEIGHT ITEMS	OVERRIDE/UNDERRIDE (THIS VEHICLE)
19.	Vehicle Curb Weight	25. Front Override/Underride (this Vehicle)O
	10 kilograms. (045) Less than 450 kilograms (610) 6,100 kilograms or more	26. Rear Override/Underride (this Vehicle) (0) No override/underride, or
	(999) Unknown	not an end-to-end impact Override (see specific CDC)
	Source:	(1) 1st CDC (2) 2nd CDC
20.	Vehicle Cargo WeightO, _O O 10 weight to nearest 10 kilograms.	(3) Other not automated CDC (specify):
	(000) Less than 5 kilograms (450) 4,500 kilograms or more (999) Unknown	Underride (see specific CDC) (4) 1st CDC (5) 2nd CDC
	,lbs X .4536 =,kgs	(6) Other not automated CDC (specify):
21.	Towed Trailing Unit (0) No towed unit	(7) Medium/heavy truck or bus override (9) Unknown
	(1) Yes—towed trailing unit (9) Unknown	HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V
22.	Documentation of Trajectory Data for This Vehicle (0) No (1) Yes	Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown
23.	Post Collision Condition of Tree or Pole (For Highest Delta V)	27. Heading Angle For This Vehicle
	 (0) Not collision (for highest delta V) with tree or pole (1) Not damaged (2) Cracked/sheared (3) Tilted <45 degrees (4) Tilted ≥45 degrees (5) Uprooted tree (6) Separated pole from base (7) Pole replaced (8) Other (specify): 	28. Heading Angle For Other Vehicle <u>295</u>
	(9) Unknown	

PSUJ09-035K Velocident Sampling System-Crashworthiness Data System: General Vehicle Form

OTHER DATA	61. Rollover Initiation Object Contacted
56. Driver's Zip Code	
(00000) Driver not present (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99999) Unknown	62. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover (1) Wheels/tires (2) Side plane
57. Driver's Race/Ethnic Origin (0) Driver not present (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (8) Other (specify):	(3) End plane (4) Undercarriage (5) Other location on vehicle (specify): (8) Non-contact rollover forces (specify): (9) Unknown 63. Direction of Initial Roll
58. Vehicle Special Use (This Trip) (0) No special use (1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police (6) Ambulance (7) Fire truck or car (8) Other (specify):	 (1) Roll right - primarily about the longitudinal axis (2) Roll left - primarily about the longitudinal axis (5) End-over-end (i.e., primarily about the lateral axis) (9) Unknown roll direction PRECRASH DATA
(9) Unknown ROLLOVER DATA If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank. If GV24 (Rollover) = 0, then GV59-GV63 must equal 0.	64. Pre-Event Movement (Prior to Recognition of Critical Event) (01) Going straight (02) Slowing or stopping in traffic lane (03) Starting in traffic lane (04) Stopped in traffic lane
If GV24 = 9, then GV59-GV63 must equal 9. 59. Rollover Initiation Type (0) No rollover (1) Trip-over (2) Flip-over (3) Turn-over (4) Climb-over (5) Fall-over (6) Bounce-over (7) Collision with another vehicle (8) Other rollover initiation type specify): (9) Unknown rollover initiation type	(05) Passing or overtaking another vehicle (06) Disabled or parked in travel lane (07) Leaving a parking position (08) Entering a parking position (09) Turning right (10) Turning left (11) Making a U-turn (12) Backing up (other than for parking position) (13) Negotiating a curve (14) Changing lanes (15) Merging (16) Successful avoidance maneuver to a previous critical event (97) Other (specify):
60. Location of Rollover Initiation (0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (9) Unknown	(98) No driver present (99) Unknown

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover (01-30) — Vehicle Number	(57) Fence (58) Wall
	(59) Building
Noncollision	(60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(33) Jackknife	(62) Fire hydrant
	(63) Curb
Collision With Fixed Object	(64) Bridge
(41) Tree (≤ 10 cm in diameter)	(68) Other fixed object (specify):
(42) Tree (> 10 cm in diameter)	(,,,,,,,,
(43) Shrubbery or bush	(69) Unknown fixed object
(44) Embankment	(our online on the original or
	Collision with Nonfixed Object
(45) Breakaway pole or post (any diameter)	(71) Motor vehicle not in-transport
(40) breakaway pole of post (ally diameter)	(76) Animal
Nonbreakaway Pole or Post	(77) Train
(50) Pole or post (≤ 10 cm in diameter)	(78) Trailer, disconnected in transport
(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)	(88) Other nonfixed object (specify):
(52) Pole or post (> 30 cm in diameter)	(89) Unknown nonfixed object
(53) Pole or post (diameter unknown)	•
	(98) Other event (specify):
(54) Concrete traffic barrier	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(55) Impact attenuator	(99) Unknown event or object
(56) Other traffic barrier (includes guardrail)	(50) Children State of Object
(specify):	
(abcout).	



U.S. Department of Transportation

National Highway Traffic Safety

Administration

EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Administration								CRASH	WORTHINE	SS DATA	SYSTEM			
1. Primar	y Sampling Unit Nu	mber	0	3.	Vehicle	Numbe	er			0	<u>a</u>			
2. Case Number - Stratum 0 2 5 K														
	VEHICLE IDENTIFICATION													
VIN 6 A 3 2 C 1 2 4 8 7 4 Model Year 6														
Vehicle Ma	Vehicle Make (specify): FORD Vehicle Model (specify): FAIRCANE													
	LOCATOR													
	end of the damage		ct to the veh	nicle long	gitudinal	center	line or b	umper o	corner fo	r end in	npacts			
Specific II	mpact No.	Location	of Direct Da	amage			Lo	cation	of Field I					
1	FRT ST	THE CBC	EXTENDS 90.0	CM TWO	CB(FRT	BC to	BC						
		CRU	SH PROFI	LE IN C	CENTIN	/IETER	S							
	dentify the plane at ill, etc.) and label a				e taken (e.g., at	bumpei	r, above	bumper	r, at sill	, above			
١	Measure and docum	ent on the v	vehicle diagr	am the	location	of max	imum cı	rush.						
	Measure C1 to C6 fr	om driver t	o passenger	side in	front or	rear im	pacts ar	nd rear t	to front i	n side				
t	ree space value is d he individual C loca ide taper, etc. Rec	tions. This	may include	e the fol	lowing:	bumper	lead, b	umper t	body cor aper, sid	ntour ta le protr	ken at usion,			
(Jse as many lines/co	olumns as n	ecessary to	describ	e each d	damage	profile.							
Specific	Plane of Impact	Direct D		Field										
Impact Number	C-Measurements	Width (CDC)	Max Crush	L	C,	C ₂	C₃	C₄	C ₆	C ₆	±D			
(BUMPER	900	Cı	117-0	125.0	90.U	61.5	41.5	24.0	7.0	-460			
	FS				3.	3.	3.	3.	3.	3.				
	STA ATE				20.0	90.0	20.0	900	20.0	20.0	ļ			
	RESULT				1020	67.0	38.5	18.5	1.0	ϕ	<u> </u>			
											1			
											 			
											 			
		.,				 					 			

ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	1 1 6.0	inches	x 2.54	=	2 9 4 cm
Overall Length	197.0	inches	x 2.54	=	<u>5 0 0 cm</u>
Maximum Width	<u> </u>	inches	x 2.54	=	<u> (88</u> cm
Curb Weight	2, 9 3 9	pounds	x .4536	=	(, 3 3 3 kg)
Average Track	<u>5 4.7</u>	inches	x 2.54	=	1 3 9 cm
Front Overhang	33.4	inches	x 2.54	=	<u>8</u> 4 - 8 cm
Rear Overhang	_ 4 7.6	inches	x 2.54	=	<u> </u>
Undeformed End Width	71.6	inches	x 2.54	=	_ <u>1 8 2 cm</u>
Engine Size: cyl./displ.		сс	x .001	=	L
		CID	x .0164	=	L
	V8				

VEHICLE DAMAGE SKETCH

TIRE—WHEEL DAMAGE a. Rotation physically b. Tire

restricted

RF 2 LF 1

(1) Yes (2) No (8) NA (9) Unk.

TYPE OF TRANSMISSION

ORIGINAL SPECIFICATIONS

294.6 Wheelbase cm 500.3 **Overall Length** cm 188.9 Maximum Width cm 1333 Curb Weight kg 139-0 Average Track cm 121 Front Overhang cm 182 Rear Overhang cm Undeformed End Width 182-0 cm

Engine Size: cyl./displ. ______

WHEEL STEER ANGLES
(For locked front wheels or displaced rear axles only)

RF ± _____ o

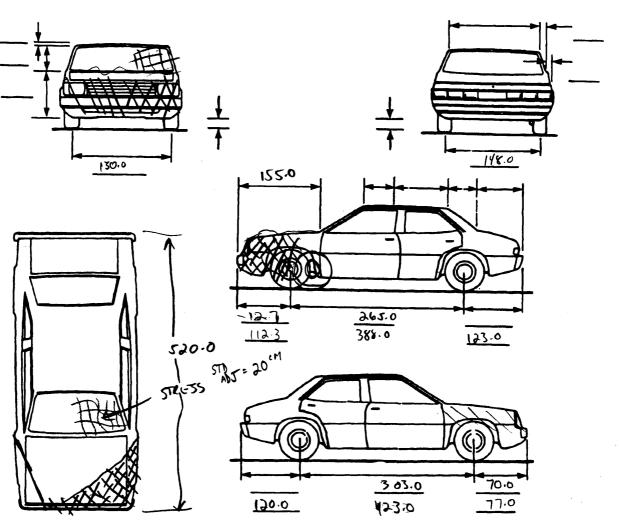
LF ± ____ o

DRIVE WHEELS

□ FWD □ RWD □ 4WD

Approximate
Cargo Weight _____kg

MEASUREMENTS IN CENTIMETERS



NOTES:

Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

CDC WORKSHEET											
		С	ODES FOR (DBJECT CON	ITACTED						
(01-30)	- Vehicle Nu	mber		(5	7) Fense						
				-	3) Wall						
Noncolli					9) Building						
	Overturn — ro			•	0) Ditch or culvert 1) Ground						
	Fire or explosi Jackknife	ion		• -	1) Ground 2) Fire hyd:	rant					
		t damage (specif	fv):		3) Curb						
,- ,,			77-		4) Bridge	Bridge					
	Noncollision in			(6:	B) Other fix	ced object (s	specify):				
(38)	Other noncolli	sion (specify):									
(20)	Namaalliaian	datailal.aa		_ (6	9) Unknow	n fixed obje	ct				
(39)	Noncollision -	 details unknow 	vn	Callie	ion with No	onfixed Obje	ct				
Collision	n With Fixed O	hiect				ehicle not in					
	Tree (≤ 10 ci				2) Pedestri		trunoport				
	Tree (> 10 ci			(7:	3) Cyclist o	or cycle					
	Shrubbery or	bush		(7-	4) Other no	onmotorist o	r conveyand	e			
(44)	Embankment				 						
(AE)	Desalesces as		dia		5) Vehicle 6) Animal	occupant					
(45)	breakaway po	ole or post (any o	nameter)	• •	7) Train						
Nonbrea	akaway Pole o	r Post				disconnected	d in transpor	t			
		≤ 10 cm in dian	neter)			onfixed obje		•			
		> 10 cm but ≤									
	diameter)			(8	9) Unknow	n nonfixed o	object				
		> 30 cm in dian diameter unknov		٨ /٥	Other o	ant languist	۸.				
(55)	Pole of post (diameter disknov	V11)	/7 (3	o, Other ev	vent (specify	, , .				
(54)	Concrete traff	fic barrier		4 / (9	9) Unknow	n event or c	biect				
(55)	Impact attenu	ator					•				
(56)		parrier (includes (guardrail)	11							
	(specify):	• .									
		DEFORMA	TION CLASS	IFICATION E	BY EVENT N	IUMBER					
					(4)	/E\					
Accident		(1) (2)			Specific	(5) Specific	(6)				
Event		Direction	Incremental	(3)	Longitudinal	Vertical or	Type of	(7)			
Sequence Number	Object Contacted	of Force (degrees)	Value of Shift	Deformation Location	or Lateral Location	Lateral Location	Damage Distribution	Deformation Extent			
- NOTTIDE!	- Contacted	(CLOCK	———	Location	Location	Location		EXTOR			
			00	£	L+C	E	<u> </u>	04			
								-			
											

Administration

INTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number			0	9	
2. Case Number - Stratum	_0	a	5	K	
3. Vehicle Number			0	ړ	

INTEGRITY

4. Passenger Compartment Integrity (00) No integrity loss

Yes, Integrity Was Lost Through

- (01) Windshield
- (O2) Door (side)
- (03) Door/hatch (back door)
- (04) Roof
- (05) Roof glass
- (06) Side window
- (07) Rear window (backlight)
- (08) Roof and roof glass
- (09) Windshield and door (side)
- (10) Windshield and roof
- (11) Side and rear window (side window and backlight)
- (12) Windshield and side window
- (13) Door and side window
- (98) Other combination of above (specify):
- (99) Unknown

Door, Tailgate or Hatch Opening

5. LF 3 6. RF (7. LR (8. RR (9. TG/H O

- (O) No door/gate/hatch
- (1) Door/gate/hatch remained closed and operational
- (2) Door/gate/hatch came open during collision
- (3) Door/gate/hatch jammed shut
- (8) Other (specify):
- (9) Unknown

Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 \neq 2, Then code \(\text{Ø} \)

10. LF<u>O</u> 11. RF<u>O</u> 12. LR<u>O</u> 13. RR O 14. TG/H O

(O) No door/gate/hatch or door not opened

Door, Tailgate or Hatch Came Open During Collision

- (1) Door operational (no damage)
- (2) Latch/striker failure due to damage
- (3) Hinge failure due to damage
- (4) Door structure failure due to damage
- (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage
- (6) Latch/striker and hinge failure due to damage
- (8) Other failure (specify):
- (9) Unknown

GLAZING

Glazing Damage from Impact Forces

15. WS 2 16. LF 0 17. RF 0 18. LR 0 19. RR 0

20. BL O 21. Roof 8 22. Other O

- (0) No glazing damage from impact forces
- (2) Glazing in place and cracked from impact forces
- (3) Glazing in place and holed from impact forces
- (4) Glazing out-of-place (cracked or not) and not holed from impact forces
- (5) Glazing out-of-place and holed from impact forces
- (6) Glazing disintegrated from impact forces
- (7) Glazing removed prior to accident
- (8) No glazing
- (9) Unknown if damaged

Glazing Damage from Occupant Contact

23. WS_O 24. LF O 25. RF O 26. LR O 27. RR O

28. BL O 29. Roof O 30. Other O

- (0) No occupant contact to glazing or no glazing
- (1) Glazing contacted by occupant but no glazing damage
- (2) Glazing in place and cracked by occupant contact
- (3) Glazing in place and holed by occupant contact
- (4) Glazing out-of-place (cracked or not) by occupant
- contact and not holed by occupant contact
- (5) Glazing out-of-place by occupant contact and holed by occupant contact
- (6) Glazing disintegrated by occupant contact
- (9) Unknown if contacted by occupant

If No Glazing Damage And No Occupant Contact or No. Glazing, Then Code IV31 Through IV46 As Ø

Type of Window/Windshield Glazing

31. WS / 32. LF O 33. RF O 34. LR Ø 35. RR O

36. BL 0 37. Roof 038. Other 0

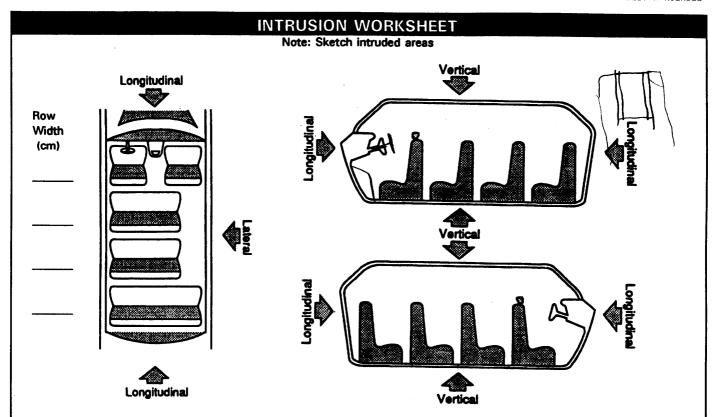
- (O) No glazing contact and no damage, or no glazing
- (1) AS-1 Laminated
- (2) AS-2 Tempered
- (3) AS-3 Tempered-tinted
- (4) AS-14 Glass/Plastic
- (8) Other (specify):
- (9) Unknown

Window Precrash Glazing Status

39. WS / 40. LF 0 41. RF 0 42. LR 0 43. RR 0

44. BL 0 45. Roof 0 46. Other 0

- (O) No glazing contact and no damage, or no glazing
- (1) Fixed
- (2) Closed
- (3) Partially opened
- (4) Fully opened
- (9) Unknown



LOCATION OF INTRUSION	INTRUDED COMPONENT	COMPARISON VALUE	l Meas	urements Are In Ce INTRUDED VALUE	ntimeters =	INTRUSION	DOMINANT CRUSH DIRECTION
11	TOEPAN	5 80 (h	_	35.0	=	23.00	cara
11	KICK PONEL	75-0	_	62-0	=	9.6	LAT
<u>li</u>	STRERIME COLUMB	58.0	-	35.0	=	23.00	Lorte
13	GLOVEBOX	700	· —	48.0	=	22,03	Long
	·		_		=		
					=		
			_		=		
			_		=		
			_		=		
					=		
			_		=		
			_		=		_
			_		=		
			_		=		
			_		=		

OCCUPANT AREA INTRUSION Note: If no intrusions, leave variables IV47-IV86 blank. INTRUDING COMPONENT Dominant Interior Components (01) Steering assembly Magnitude Cnich Location of Intrudina of Intrusion Direction (02) Instrument panel left Intrueion Component (03) Instrument panel center (04) Instrument panel right 1st 47. 1 48. 0 5 49. 3 50.2 (05) Toe pan (06) A (A1/A2)-pillar (07) B-pillar (08) C-pillar 2nd 51. 1 52. 0 1 53. 3 54. 2 (09) D-pillar (10) Door panel (side) (12) Roof (or convertible top) 3rd 55. 1 3 56. 0 4 57. 3 58. 2 (13) Roof side rail (14) Windshield (15) Windshield header (16) Window frame 4th 59. 1 1 60. 2 7 61. 2 62. 3 (17) Floor pan (includes sill) (18) Backlight header (19) Front seat back (20) Second seat back (21) Third seat back 5th 63. 64. 65. 66. (22) Fourth seat back (23) Fifth seat back (24) Seat cushion (25) Back door/panel (e.g., tailgate) 6th 67. 68. ____ 69.___ 70.___ (26) Other interior component (specify): (27) Side panel - forward of the A (A2)-pillar (28) Side panel - rear of the A (A2)-pillar 7th 71.___ 72.___ 73.___ 74.___ **Exterior Components** (30) Hood 8th 75.___ 76.___ 77.___ 78.___ (31) Outside surface of this vehicle (specify): (32) Other exterior object in the environment (specify): (33) Unknown exterior object 9th 79.___ 80.___ 81.__ 82.___ (97) Catastrophic (98) Intrusion of unlisted component(s) (specify): 10th 83. 84. 85. 86. (99) Unknown LOCATION OF INTRUSION **MAGNITUDE OF INTRUSION** (1) \geq 3 centimeters but < 8 centimeters **Fourth Seat** Front Seat (2) \geq 8 centimeters but < 15 centimeters (11) Left (41) Left $(3) \ge 15$ centimeters but < 30 centimeters (12) Middle (42) Middle (4) \geq 30 centimeters but < 46 centimeters (13) Right (43) Right (5) ≥ 46 centimeters but < 61 centimeters $(6) \geq 61$ centimeters Second Seat (97) Catastrophic (7) Catastrophic (21) Left (98) Other enclosed (9) Unknown (22) Middle area (specify) (23) Right (99) Unknown DOMINANT CRUSH DIRECTION **Third Seat** (1) Vertical (31) Left (2) Longitudinal (32) Middle (3) Lateral (33) Right (7) Catastrophic (9) Unknown

(All Measurements Are in Centimeters)								
COMPARISON VALUE	_	DAMAGE VALUE	=	DEFORMATION				
	_	n garaga a sa sa sa sa sa sa sa sa sa sa sa sa	=					
	_		=					
	_		=					
			. =					
•								

STEERING COLUMN	
87. Steering Column Type (1) Fixed column (2) Tilt column (3) Telescoping column (4) Tilt and telescoping column (8) Other column type (specify): (9) Unknown	93. Location of Steering Rim/Spoke Deformation (00) No steering rim deformation Quarter Sections (01) Section A (02) Section B (03) Section C (04) Section D Half Sections (05) Upper half of rim/spoke (06) Lower half of rim/spoke (07) Left half of rim/spoke
88. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	(08) Right half of rim/spoke (09) Complete steering wheel collapse (10) Undetermined location (99) Unknown
	INSTRUMENT PANEL
89. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	94. Odometer Reading \(\frac{\lambda \lambda \to \text{N}}{\text{Noone}} \),000 \(\frac{\lambda \lambda \lambda \text{Noone}}{\text{Noone}} \),000 No odometer (001) Less than 1,500 kilometers (500) 499,500 kilometers or more (999) Unknown
90. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	141,421 miles x 1.6093 = 227,588 kilometers Source: 050METEX
91. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-93 CDS.	95. Instrument Panel Damage from Occupant Contact? (0) No (1) Yes (9) Unknown
92. Steering Rim/Spoke Deformation Code actual measured deformation to the nearest centimeter (00) No steering rim deformation (01-14) Actual measured value in centimeters	96. Knee Bolsters Deformed from Occupant Contact? (0) No (1) Yes (8) Not present (9) Unknown
(15) 15 centimeters or more (98) Observed deformation cannot be measured (99) Unknown	97. Did Glove Compartment Door Open During Collision(s)? (0) No (1) Yes (8) Not present (9) Unknown

BEST AVAILABLE Page 4 National Accident Sampling System-Crashworthiness Data System: Interior Vehicle Form **VEHICLE INTERIOR SKETCHES** Note area of ejection/entrapment

Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure.

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate. Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

(9) Unknown

			POII	VTS	OF OC	CUPANT	r conta	CT		
		Interior Component	Occupant No. If		Body Region If					Confidence Level of Contact
Cont		Contacted	Known		Cnown		Supporting Physical Evidence			Point
A		27		48	FOR		TRUSION	-,	•	
В		59		(0)	Fuar		MRUSIUM			
С		09			iee S		amed			1
D)	05		F	ALE	HOB	COVER	264	NE	
E										
F	1									
G								-		
Н	l						 			
i				1						
J				+				· · · · · · · · · · · · · · · · · · ·		
K				+						
				+		<u> </u>				
M				-						
				 						
N										
FRONT (01)	Windsh	ield	C	(23)	Left B-pills		MPONENTS	(46)	Other occupants	(specify):
(02) (03)	Mirror Sunviso	or		(25)	Left side v	vindow glass	or frame	(47) (48)	•	
(04)	Steering	g wheel rim			Left side v	vindow glass	including			
		g wheel hub/spok g wheel (combins				re of the foll idow sill, A (owing: (A1/A2)-pillar,	(49)	Other interior obje	ect (specify):
(07)		s 04 and 05) g column, transm	inain-	(07)	B-piller, or	roof side rai	1.	D005		
	selector	lever, other atta	chment	(2/)	KICK I	eide object (AMEL	вресну):	ROOF (50)	Front header	
(08)		equipment (é.g., ir conditioner)	CB, tape	(28)	Left side v	vindow sill		(51) (52)	Rear header Roof left side rail	
	Left ins	trument panel an		RIGHT				(53)		A ·
(10) (11)		instrument panel strument panel a		(30)	_	interior surfa hardware or	•	(54)	Roof or convertible	e top
(12)	Glove c	ompartment doo			Right side	hardware or		FLOOR		
	Knee bo Windshi	olster ield including one	or more	(32) (33)	Right A (A Right B-pil			(56) (57)	Floor (including to	
	of the f	ollowing: front h	eader,	(34)		t pillar (speci	fy):	(0//	transmission leve	
		\2)-pillar, instrum or steering assen		(35)	Right side	window glas	s or frame	(58)	console Parking brake han	rdie
(45)	side onl	• •	•		Right side	window glas	se including		Foot controls incl	
(15)		ield including one ollowing: front h				re of the folk idow sill, A (owing: (A1/A2)-pillar,		brake	
		\2)-pillar, instrum passenger side o		/2 7 \	B pillar, or	roof side rai	i.	REAR		
(16)		ide air bag comp	•	(37)	Other right	t side object	(specity):	(60) (61)	Backlight (rear wi	-
(17)	cover Passeno	ger side air bag		(38)	Right side	window sill		(62)		
	compar	tment cover		INTERI						
(18)		ield reinforced by specify):	exterior		Seat, back Beit restra	support int webbing/	buckle			
(19)		ont object (speci	fy):	(42)	Belt restra	int B-pillar			CONFIDENCE LE	VEL OF
				(43)	attachmen Other rest	t point raint system	component		CONTACT PO	TAIC
LEFT SI		. interior			(specify):_				(1) Certain	
(20)		e interior surface ng hardware or a		(44) (45)	Head restr Air bag (u	aint system se codes "1	6" and "17"		(2) Probable (3) Possible	

for injuries sustained from air bag

compartment covers)

(21) Left side hardware or armrest

(22) Left A (A1/A2)-pillar

		AUTOMATIC RESTRAINTS	
NOTE	S: Encode the data for each ap below. Restraint systems s Assessment Form.	oplicable front seat position. The attrib hould be assessed during the vehicle in	oute for the variables may be found inspection then coded on the Occupa
		AIR BAGS	
		Left	Right
F	Availability/Function		/-
R	Deployment		
S	Failure		
Air Bag (0) (1) <i>Non</i> - (2)	g System Availability/Function Not equipped/not available Air bag -functional Air bag disconnected (specify): Air bag not reinstalled Unknown	Air Bag System Deployment (O) Not equipped/not available (1) Air bag deployed during accident (as a result of impact) (2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, ascident sequence undetermined (4) Nondeployed (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown	Did Air Beg System Fell? (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown
	·	AUTOMATIC BELTS	
		Left	Right
	Availability/Function		
F	Use	Y	
Ŕ	Туре		
S	Proper Use		
•	Failure Modes		
Availab (0) (1) (2) (3)	atic (Passive) Belt System Bity/Function Not equipped/not available 2 point automatic belts 3 point automatic belts Automatic belts - type unknown	Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperty	Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in u (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing sincluded) (3) Broken buckle or latchplate (4) Upper anchorage separated
	Automatic belts destroyed or rendered inoperative	(3) Automatic shoulder belt worn under arm	(5) Other anchorage separated (specify
Automa (0) (1) (2)	Unknown atic (Passive) Beit System Use Not equipped/not available/destroyed or rendered inoperative Automatic belt in use Automatic belt not in use (manually disconnected, motorized track inoperative) Automatic belt use unknown Unknown	 (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): 	(6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specification) (9) Unknown
Automa (0) ((1) ((2) (onknown atic (Passive) Belt System Type Not equipped/not available Non-motorized system Motorized system Unknown	(8) Other improper use of automatic belt system (specify):	

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Ocupant Assessment Form.

If a Child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.

		Left	Center	Right
F Ava	ailability	3	3	3
R Use		00	00	90
T Fail	ure Modes	0	0	U
S Ava	ailability	3	3	3
S Ava)	00	00	00
N D Fail	ure Modes	ð	0	0
T Ava	ailability			
I Use	•			
R Fail	ure Modes			
O Ava	ailability			
H Use				
E Fail	ure Modes			

Manual (Active) Belt System Availability

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):
- (9) Unknown

Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperable (specify):
- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used type unknown

- (08) Other belt used (specify):
- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat type unknown
- (18) Other belt used with child safety seat (specify):
- (99) Unknown if belt used

Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other manual belt failure (specify):
- (9) Unknown

CIII D CAFETY	A CEAT FIELD ACCECCMENT
	Y SEAT FIELD ASSESSMENT ccupant's number in the first row and complete the column below
	below. Complete a column for each child safety seat present.
Occurrent Number	
Occupant Number	
1. Type of Child Safety Seat	
2. Child Safety Seat Orientation	
3. Child Safety Seat Harness Usage	
4. Child Safety Seat Shield Uasge	
5. Child Safety Seat Tether Usage	
6. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat
Type of Child Safety Seat	3. Child Safety Seat Harness Usage
(0) No child safety seat	4. Child Safety Seat Shield Usage
(1) Infant seat	4. Clind Salety Seat Sineid Osage
(2) Toddler seat (3) Convertible seat	5. Child Safety Seat Tether Usage
(4) Booster seat	Note: Options Below Are Used for Variables 3-5.
(7) Other type child safety seat (specify):	(00) No child safety seat
(8) Unknown child safety seat type	Not Designed with Harness/Shield/Tether
(9) Unknown if child safety seat used	(01) After market harness/shield/tether added, not used
2. Child Safety Seat Orientation	(02) After market harness/shield/tether used
(00) No child safety seat	(03) Child safety seat used, but no after market harness/shield/tether added
Designed for Rear Facing for	(09) Unknown if harness/shield/tether
This Age/Weight	added or used
(01) Rear facing (02) Forward facing	Designed With Harness/Shield/Tether
(08) Other orientation (specify):	(11) Harness/shield/tether not used
(09) Unknown orientation	(12) Harness/shield/tether used (19) Unknown if harness/shield/tether used
Designed for Forward Facing for This	Linkson If Designed With Lineses (Chief Tesher
Age/Weight	Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used
(11) Rear facing	(22) Harness/shield/tether used
(12) Forward facing(18) Other orientation (specify):	(29) Unknown if harness/shield/tether used
(10) Other orientation (specify):	(99) Unknown if child safety seat used
(19) Unknown orientation	•
Unknown Design or Orientation For This	6. Child Safety Seat Make/Model
Age/Weight, or Unknown Age/Weight	(Specify make/model and occupant number)
(21) Rear facing	
(22) Forward facing	
(28) Other orientation (specify):	
(29) Unknown orientation	

(99) Unknown if child safety seat used

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F	Head Restraint Type/Damage	0	0	0
I R	Seat Type	03	03	03
S	Seat Performance	l		1
	Seat Orientation	1		
S	Head Restraint Type/Damage	0	0	0
E	Seat Type	03	03	63
0 N	Seat Performance	(1	1
Ď	Seat Orientation	(\	1
Т	Head Restraint Type/Damage			
Ĥ	Seat Type			
R	Seat Performance	_		
D	Seat Orientation			
0	Head Restraint Type/Damage			
Ť	Seat Type			
E	Seat Performance			
R	Seat Orientation			

Head Restraint Type/Damage by Occupant at This **Occupant Position**

- No head restraints
- (1)
- Integral no damage Integral damaged during accident (2)
- (3)
- Adjustable no damage Adjustable damaged during accident (4)
- (5) Add-on — no damage
- Add-on damaged during accident (6)
- (8) Other Specify):
- (9) Unknown

Seat Type (this Occupant Position)

- (00) Occupant not seated or no seat
- (01)**Bucket**
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- Pedestal (i.e., column supported) (08)
- (09)Other seat type (specify):
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

Seat Performance (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed specify:
- (4) Seat tracks/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown

Seat Orientation (this Occupant Position)

- (0) Occupant not seated or no seat
- Forward facing seat (1)
- (2) Rear facing seat
- (3) Side facing seat (inward)
- Side facing seat (outward)
- (8) Other (specify):
- (9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

	EJECTION/ENTRAPMENT DATA							
Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occpant Assessment Form.								
	EJECTION No [/] Yes [] Describe indications of ejection and body parts involved in partial ejection(s):							
	Occupant Number							
	Ejection				,			
	(Note on Vehicle Interior Sketch) Ejection Area		10/18					1
	Ejection Medium		Non					
	Medium Status							
Ejection (1) Complete ejection (1) Partial ejection (3) Ejection, Unknown degree (9) Unknown		(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown		(5) Integral structure (8) Other medium (specify): (9) Unknown				
Ejection Area (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear Ejection Medium (1) Door/hatch/tailgate (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Right rear (6) Rear Medium Status (Immediat to Impact) (1) Open (2) Closed (3) Integral structure (9) Unknown		•	Prior					
ENTRAPMENT No [4 Yes [] Describe entrapment mechanism:								
Com	Component(s):							
(Note	e in vehicle interior diagram)							



U.S. Department of Transportation

OCCUPANT ASSESSMENT FORM

Form Approved
O.M.P. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

National Highway Traffic Safety Administration

1. Primary Sampling Unit Number 0 9	OCCUPANT'S SEATING
2. Case Number - Stratum O 3 5 K	10. Occupant's Seat Position
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex (1) Male (2) Female (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown	Fourth Seat (41) Left side (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant
inches X 2.54 = centimeters	(97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999)Unknown	11. Occupant's Posture (0) Normal posture
9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front
(9) Onknown	of seat (8) Other abnormal posture (specify): (9) Unknown

	EJECTION/ENTRAPMENT				
12.	Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	0	15. Medium Status (Immediately Prior To Impact) O (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown		
13.	Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	0	16. Entrapment (NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.) (0) Not entrapped (1) Entrapped (9) Unknown		
14.	Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	0			

RESTRAINT SYS	TEM EVALUATION
17. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed)	21. Air Bag System Availability/Function (O) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(8) Other belt (specify): (9) Unknown 18. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	22. Air Bag System Deployment (0) Not equipped/not available (1) Air bag deployed during accident (as a result of impact) (2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined (4) Nondeployed (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used 19. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	23. Are There Indications of Air Bag System Failure? (O) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown Note: See Variables 44 through 48 (Page 5) for Information on Automatic Belts
Belt Used Improperty (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (9) Unknown 20. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify):	24. Police Reported Restraint Use (0) None used (1) Police did not indicate restraint use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Other or automatic restraint (specify): (8) Restrained, type unknown (9) Police indicated "unknown"
(a) Chichen	

HEAD RESTRAINT AN	ID SEAT EVALUATION
25. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):	27. Seat Performance (this Occupant Position) (0) Occupant not seated or no seat (1) No seat performance failure(s) (2) Seat adjusters failed (3) Seat back folding locks or "seat back" failed (4) Seat track/anchors failed (5) Deformed by impact of occupant (6) Deformed by passenger compartment intrusion (specify):
(9) Unknown	(7) Combination of above (specify):
	(8) Other (specify):
26. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s)	(9) Unknown
(06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Other seat type (specify):	
(10) Box mounted seat (i.e., van type) (99) Unknown	

	С	HILD SAF	AFETY SEAT
28.	Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify): (998) Unknown make/model (999) Unknown if child safety seat used	CDS	32. Child Safety Seat Shield Usage 33. Child Safety Seat Tether Usage Note: Options below applicable to Variables OA31-OA33.
	Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/We (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age (11) Rear facing (12) Forward facing (12) Forward facing (13) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation	O O	Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used Unknown if Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

	INJURY CONSEQUENCES	38 Working Days Lost 9 9
34.	Injury Severity (Police Rating) (0) 0 - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident	38. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
35.	Treatment - Mortality (0) No treatment (1) Fatal	STOP - GO TO VARIABLE 44 ON PAGE 7 VARIABLES 39 THROUGH 43 ARE COMPLETED BY THE ZONE CENTER
	(2) Fatal - ruled disease (specify): Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (8) Treatment - other (specify): (9) Unknown	Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown
	Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):	40. 1st Medically Reported Cause of Death 41. 2nd Medically Reported Cause of Death 42. 3rd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (97) Other result (includes fatal ruled disease) (specify):
	Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown	43. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured

	AUTOMATIC BELT SYSTEM	48.	Automatic (Passive) Belt Failure Modes O
44.	Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown		During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):
	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown		(6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify): (9) Unknown
45.	Automatic (Passive) Belt System Use O		(3) Officiowii
	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown	49.	Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
46.	Automatic (Passive) Belt System Type O	<u> </u>	(3) OHKHOWH
	(0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown	ST	TOP - VARIABLES 50 THROUGH 52 ARE OMPLETED BY THE ZONE CENTER
			TRAUMA DATA
47.	Proper Use of Automatic (Passive Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person	50.	Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
	 (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): 	51.	Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given
	 (8) Other improper use of automatic belt system (specify): (9) Unknown 	52.	. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of theHCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
	ARE ALL APPLICABLE MEDICAL RECOR	RDS	INCLUDED NO [YES []
	UPDATE CANDIDATE?		NO[] YES[/]



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U.S. Department of Transportation

National Highway Traffic Safety OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

2. Case Number - Stratum

<u>09</u> 0a5K

- 3. Vehicle Number
- 4. Occupant Number

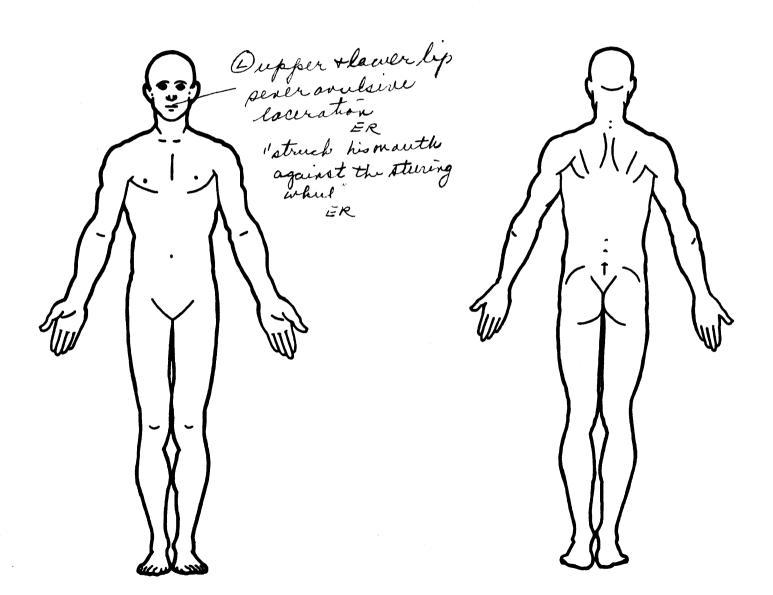
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INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

		0.i.CA.i.S							Injury		Occupant
	Source of Injury Data	/ Body Region	_	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	/ Aspect	Injury Source	Source Direct/ Confidence Indirect Level Injury		
Ma 181	fllav 5. <u>3</u>	j alve 6.2	oler fr	. <u>02</u>	9. <u>00</u>	102	<u>. 11. 8</u>	12.05	13/	14/	15. 02
sou	land	lip						23. <u>05</u>			
ill	ow is	y									
3rd	27.3	28. 7	29. <u>9</u> 30	.04	31.02	32. <u>/</u>	33. <u>2</u>	34. <u>09</u>	35.2	36. 🖊	37. (-)_
4th	38	39	40	i	42	43	44	45	46	47	48
5th	49	50	51 53	2	53	54	55. <u> </u>	56	57.	58	59
6th	60	61	62 63	3	64	65	66	67	68	69	70
7th	71	72	73 74	1	75	76,	77	78	79	80	81
8th	82	83	84 81	5	86	87	88	89	90	91	92
9th	93	94	95 9	3	97	98,	99	100	101	102	103
10th	104	105, 1	106 10	7 1	108	109	110	111	112	113	114

OCCUPANT INJURY DATA											
	Source of Injury Data	Body Region	Type of Anatomic Structure	O.I.CA Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
	Data	Negion	Structure	Structure	пјагу	Sevency	Aspect	Source	Level	injury	Number
11th						_	—				
12th			_			-					
13th	-		_				_				
14th											
15th											
iotu						-			******		
16th											
17th											
18th											
19th	_										
20th		*****									
21st					*****						
22nd	-		-				-				
23rd		_									
24th											
£7UI				*****							
25th											



SOURCE OF INJURY DATA OFFICIAL

- (1) Autopsy records with or without hospital/ medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (O2) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission
 - selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only) (16) Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify):_
- (19) Other front object (specify):

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- Right side hardware or armrest
- Right A (A1/A2)-pillar (32)
- (33) Right B-pillar
- (34) Other right pillar (specify):
- (35) Right side window glass or frame
- Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify):_
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Interior loose objects
- (48) Child safety seat (specify):
- (49) Other interior object (specify):

ROOF

- (50) Front header
- (51) Rear header (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking

(60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- Other exterior surface or tires (specify):
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify):
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify)
- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify):
- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE **ENVIRONMENT**

- (84) Ground
- (85) Other vehicle or object (specify)
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify):
- (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- 121 Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Face (3) Neck
- (4) (5)
- Abdomen
- (7) Upper Extremity Lower Extremity Unspecified
- Whole Area
- Nerves

Type of Anatomic Structure

- Organs (includes muscles/ (igaments)
- Skeletal (includes joints) Head - LOC Skin

Specific Anatomic Structure

- Whole Area (02) Skin Abrasion (04) Skin Contusion
- Skin Laceration (OR) Skin - Avulsion
- (10) Amputation Burn (20)
- (30) Crush
- (40) Degloving
- (50)
- Injury NFS Trauma, other than mechanical

- Head LOC (02) Length of LOC (04, 06, 08) Level of Consciousness (10) Concussion

- Cervical Thoracic
- Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to seventy or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity

Abbreviated Injury Scale

- Minor injury Moderate injury
- Serious injury (4) Severe injury
- Critical injury
- Maximum (untrestable)
 Injured, unknown severity

Aspect

- Right
- Left
- **Bilateral** Central
- (4) (5) Anterior **Posterior**
- (7) Superior
- Unknown
- Whole region

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

Blood Alcohol Level (mg/dl)

Glasgow Coma Scale Score

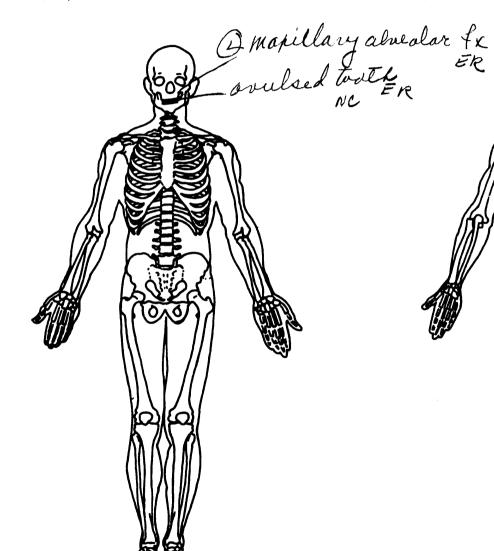
Units of Blood Given

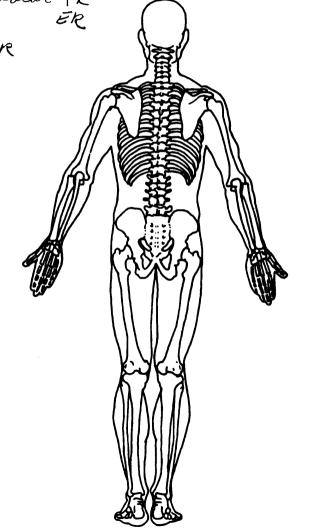
Units =

Arterial Blood Gases

PO,=

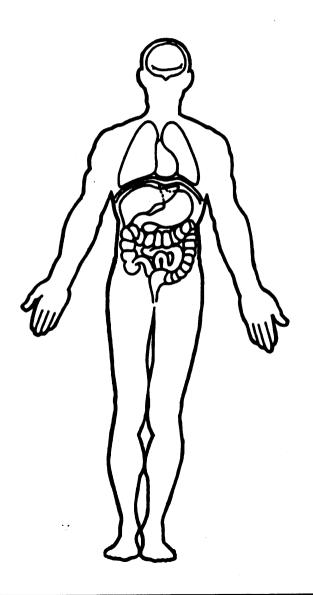
PCO, HCO.

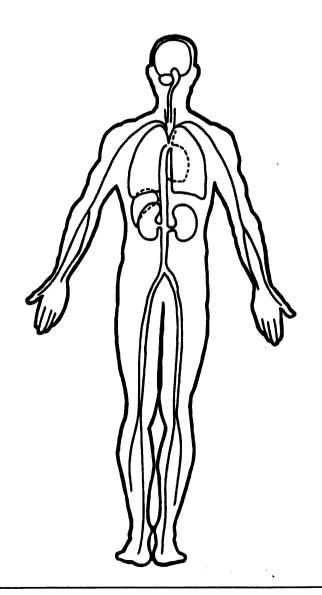




OFFICIAL INJURY DATA -INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)







U.S. Department of Transportation

CRASHPC PROGRAM SUMMARY

National	Highway	Traffic	Safety
Adminie	tration		-

(All Measurements In Metric)

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Identifying Title	0 2 5 K		0 1		9 3
Primary	Case NoStratum		cident Event	Date (Month, day, year	of Run
Sampling Unit		S:	equence No.		
CRASHPC Vehicle Ide					,
Vehicle 1	1982	FORD		ESCORT	
Vehicle 2	1966	FORD		FRIREAME	
	Year	Make		Model	NASS Veh. No.
	GE	NERAL IN	FORMATI	ON	
	VEHICLE I			VEHICLE 2	
Size			Size		4
Weight	4	V/	Weight		9. "
$\frac{912.1}{\text{Curb}} + \frac{172}{\text{Occupant(s)}} + \frac{1}{1}$	$\frac{\varphi}{\text{Cargo}} = \frac{1}{\sqrt{Q}} \frac{Q}{\sqrt{Q}}$	<u>7</u> kg	(333 + Curb C	$\frac{16}{1} + \frac{1}{1} = \frac{1}{1} \frac{9}{1}$	
CDC	IZFLE	ω 3	CDC	Occupant(s) Cargo	E W 4
PDOF (-180 to +180	 	0 .		30 to +180) +	- 1 0 0
Stiffness		- 9	Stiffness		— – – – 4
	S	CENE INF	ORMATIO	N	
Rest and Impact Posi	tions [] No, Go To	Demage Info	rmation [] Yes	
'	/EHICLE 1			VEHICLE 2	
Rest	X	. m	Rest	X	. m
Position	Υ	. m	Position	Υ	m
	PSI	· o		PSI	0
Impact			1		
Impact Position	X	··m	Impact Position	X	· m
	PSI	.·m		Υ	m
Slip Angle(-180 to +			Slip Apolo	PSI e (-180 to +180)	— °
		VEHICLE	MOTION	(-100 to +100)	
Carrier Carrier		VEHICLE	IVIOTION		
Sustained Contact	/EHICLE 1			V5.4101.5.0	
			***************************************	VEHICLE 2	
Skidding (Rotation)	I I No	i l Yes	Skidding (•	No [] Yes
Skidding Stop Be	fore Rest [] No	[] Yes	Skiddi	ing Stop Before Rest []	No []Yes
End of Rotation Position	x	m	End o	f Rotation X	m
rosition	Υ	m	Positio	on Y	
	PSI	<u> </u>		PSI	o
Curved Path	I I No	I] Yes	Curved Pa	ith ()	No [] Yes
Point on Path	-		*******************	on Path	
x	m Y	m	x	m Y	m
Rotation Direction	l] None [] CW [1 CCW	Rotation (Direction 1 None 1	CW L LCCW
	[]No []Yes	T	Rotation	>360° []No []Y	***************************************

FRICTION	INFORMATION	TRAJECTOR	Y INFORMATION
Coefficient of Friction		Trajectory Data []	No [] Yes
Rolling Resistance Opt		If No, Go To Damage	Information
Troming reductance op		Vehicle 1 Steer Angle	c
Vehicle 1 Rolling F	Resistance	LF	
	RF	LR	
LR	RR		
		Vehicle 2 Steer Angle	s
Vehicle 2 Rolling F		LF	° RF °
	RF	LR	° RR °
LR	RR		
		Terrain Boundary [] No. [] Yes
		First Point	
		X m	Y m
		Second Point	
		Xm	Y m
		Secondary Coefficient	t of Friction
	DAMAGE IN	IFORMATION	
V	EHICLE 1	VI	EHICLE 2
Damage Length	L <u>(5 7</u> cm	Damage Length	L <u>(8 2 cm</u>
Crush Depths	C ₁ <u>6</u> cm	Crush Depths	$C_1 \underline{ (\ 0 \ 2 \ cm)}$
·	C ₂ <u> </u>		$C_2 \underline{\qquad 6 \qquad 7 cm}$
	C₃ <u> </u>		$C_3 \qquad 3 \qquad cm$
	C ₄		C ₄
	C ₆ cm		C ₆ cm
	C ₆ O_cm		C ₆ cm
Damage Offset	D + - 54.5 cm	Damage Offset	D + - 4 6 cm
IF THIS COMMON IM	IPACT WAS WITH A MOTOR VEHICL	E <i>NOT IN TRANSPORT,</i> FILL	IN THE INFORMATION BELOW.
Madel Vers		The Weight CDC C	a Data and Damasa Lafe word
		for this vehicle should be	e Data and Damage Information
1		for this vehicle should t	Je recorded above.
Complete a	and ATTACH the appropriate vehic	ele damage sketch and dim	nensions to the Form.
	,,	-	
İ	•		

SUMMARY OF CRASHPC RESULTS USING DAMAGE

025K

SPEED CHANGE (DAMAGE)

VEHICLE #1

 TOTAL
 44 KPH (27 MPH)

 LONGITUDINAL
 -43 KPH (-27 MPH)

 LATITUDINAL
 8 KPH (5 MPH)

 PDOF ANGLE
 -10 DEGREES

ENERGY DISSIPATED = 57778 JOULES (42609 FT-LB)

VEHICLE #2

TOTAL 32 KPH (20 MPH)
LONGITUDINAL -31 KPH (-19 MPH)
LATITUDINAL 6 KPH (3 MPH)
PDOF ANGLE -10 DEGREES

ENERGY DISSIPATED = 105676 JOULES (77932 FT-LB)

DAMAGE DATA

VEHICLE #1

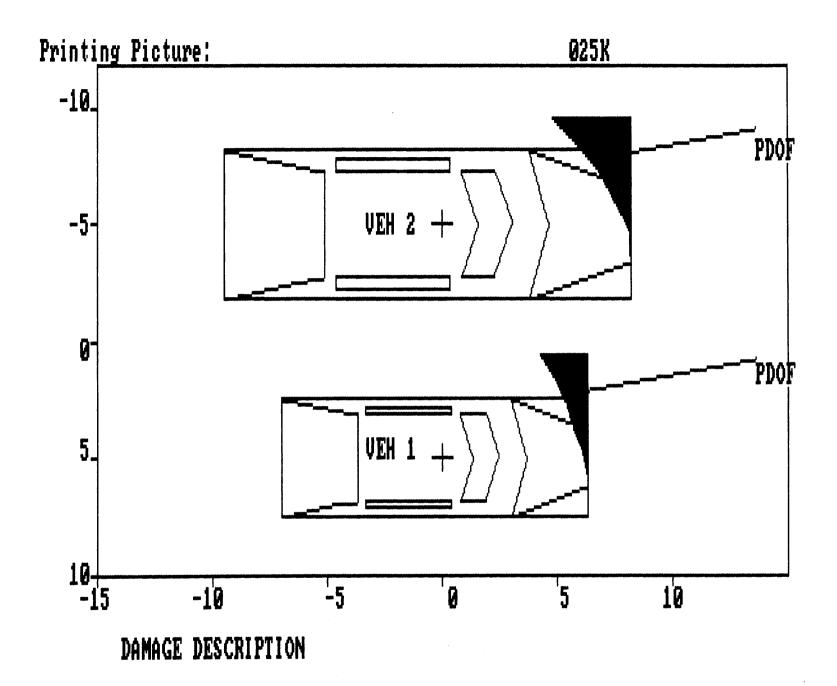
VEHICLE #2

SIZE CATEGORY STIFFNESS CATEGORY	1 9	4 4
VEHICLE WEIGHT	1084 KGS (2390 LBS)	1494 KGS (3294 LBS)
CDC	12FLEW3	12FYEW4
PDOF ANGLE	-10 DEGREES	-10 DEGREES
CRUSH LENGTH	157 CM. (62 IN.)	182 CM. (72 IN.)
C:1	61 CM. (24 IN.)	102 CM. (40 IN.)
C2	41 CM. (16 IN.)	67 CM. (26 IN.)
C3	27 CM. (11 IN.)	39 CM. (15 IN.)
C4	17 CM. (7 IN.)	19 CM. (7 IN.)
C5	6 CM. (2 IN.)	1 CM. (0 IN.)
C6	0 CM. (0 IN.)	0 CM. (0 IN.)
D	-55 CM. (-21 IN.)	-46 CM. (-18 IN.)
D'	-86 CM. (-34 IN.)	-91 CM. (-36 IN.)

(* INDICATES DEFAULT VALUE)

DIMENSIONS AND INERTIAL PROPERTIES

	VEHICLE #1	VEHICLE #2			
CG TO FRONT AXLE	115 CM. (45 IN.) 122 CM. (48 IN.)	139 CM. (55 IN.) 150 CM. (59 IN.)			
TRACK CG TO FRONT OF VEH CG TO REAR OF VEH	130 CM. (51 IN.) 193 CM. (76 IN.) -213 CM. (-84 IN.)	157 CM. (62 IN.) 251 CM. (99 IN.) -290 CM. (-114 IN.)			
CG TO SIDE OF VEH MOMENT OF INERTIA VEHICLE MASS	77 CM. (30 IN.) 5654 KGS (12466 LBS) 3 KGS (6 LBS)	98 CM. (39 IN.) 14534 KGS (32041 LBS) 4 KGS (9 LBS)			



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000000000000000							

GENERAL VEHICLE Vehicle: 1

Total Case Errors 0

11

INTRA ERRORS

24 equals 1-9, then PSU09 O CASE 025K CURRENT VERSION: (ERROR	N GV29 shoul SUMMARY SCREEM	d GG0422	equal 4 or 06/15/	5.
FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT	
Accident	0	O	0	Y	
General Vehicle	0	0	1	Ÿ	
Vehicle Exterior	0	O	ं	Ý	
Vehicle Interior	0	0	Ö .	Ϋ́	
Occupant Assesment	Ö	O	ं	Ý	
Occupant Interior	ं	0	0 1	Y	
Total Inter Errors	5	O	0		

OGGO421 2 If ROLLOVER GV

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U.S. Department of Transportation

National Highway Traffic Safety Administration

SLIDE INDEX

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

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dministration			CRASHWORTHINESS DATA SYSTE
Primary S	ampling Ur	nit Number O	Case Number-Stratum O 2 5 K
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6-10		EAST	LOOK BACK
11-13	J	EAST	FORWARD TRAJECTION
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-025K (1993) #17









































SK (1993) #37









5K (1993)#4





DK (1993) #43



























































5K (1993)#/







W /4009\ #7E











